



DC Child and Family Services Agency

Four Pillars Performance Report

January-June 2021



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GOVERNMENT OF THE
DISTRICT OF COLUMBIA
DC MURIEL BOWSER, MAYOR



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INTRODUCTION

CFSA as a Self-Regulating Agency

The District of Columbia's Child and Family Service Agency (CFSA) has implemented several strategies to advance from a compliance-based culture to a culture of robust continuous quality improvement. As a self-regulating system that supports growth and innovation, CFSA focuses on creating an intentional culture of learning with multiple opportunities for reviewing Agency practice and performance. In so doing, CFSA has successfully exited the 32-year class action lawsuit, *LaShawn v. Bowser*.¹ CFSA first entered a Settlement Agreement on August 7, 2020, and then agreed to an Addendum to the Settlement Agreement on April 22, 2021 prior to the final exit on June 1, 2021.

Shortly after CFSA exited the lawsuit in June, the Agency experienced an important leadership transition when former Director Brenda Donald retired. Director Donald was an integral force in the achievement of CFSA's exit from the lawsuit, as well as implementation of the Agency's Four Pillars Strategic Framework. To continue institutionalizing innovative practices and improving performance, Mayor Bowser has selected former Principal Deputy Director, Robert L. Matthews, as the Acting CFSA Director. As Principal Deputy Director, Robert Matthews led sustained practice improvements, along with the CFSA team, which have significantly contributed to CFSA becoming a high performing child welfare agency. Acting Director Matthews' experience, skills, and passion

¹https://www.acludc.org/sites/default/files/lashawn_a._et_al_v._bowser_et_al._1222._final_order_of_approval_of_settlement._signed_by_judge_thomas_f._hogan_on_june_1_2021.pdf

will continue to lead CFSA's ongoing and overall high-performing capacity to self-regulate and self-govern with transparency and authentic leadership.

During the lawsuit, the Center for the Study of Social Policy (CSSP) served as the Court Monitor responsible for independently reviewing the agency's performance and reporting to U.S. District Court Judge Thomas F. Hogan, Plaintiffs, CFSA and the public. Under the Settlement Agreement structuring exit from the LaShawn decree, CSSP now serves as the Independent Verification Agent (IVA). As the IVA, CSSP will validate CFSA's data and provide an assessment of the Agency's public performance reports for two 6-month periods – the first period begins January 1, 2021 and ends June 30, 2021; the second begins July 1, 2021 and ends December 31, 2021. Both reports include data on performance outcomes based upon CFSA's Four Pillars Performance Framework and specific metrics agreed to by CSSP and lawsuit Plaintiffs.

This report is the first of the two required public performance reports, covering the January 1, 2021 - June 30, 2021 timeframe. The report provides performance data and outcomes on 35 measures and 7 commitments, per the Settlement Agreement. The measures are organized by CFSA's Four Pillars framework, which are described further below. Each measure includes an analysis of steps taken to reach the benchmark or the steps taken to overcome barriers to reaching benchmarks.

Continuous Quality Improvement

CFSA invests a significant number of resources into continuous quality improvement (CQI) to create a learning environment that uses data to help inform and improve Agency outcomes, processes, procedures, and functions. CFSA also uses many methods of qualitative and quantitative analysis to evaluate the quality of services, to identify strengths and needs of the service delivery system, and to provide reports that include information about program performance, all of which culminates in a robust self-regulating system of performance. The Agency has also established multiple ongoing forums to discuss performance and root-cause analyses of barriers and strategies to address gaps and strategies to highlight successful improvements. These include the Finish Line, 4 Pillars Huddles, QSR Exit Conferences, qualitative review debriefs, and meetings for specific analyses described further throughout the report.

Highlights of System and Program Level Resources and Forums

In late fiscal year (FY) 2017, CFSA's Office of Agency Performance, Quality Assurance and Quality Improvement all merged to become the Performance Accountability and Quality Improvement Administration (PAQIA) under the direction of the Office of Planning, Policy, and Program Support (OPPPS). This change centralized system evaluation and CQI activities under one administration,

allowing for more effective collection, analysis, and reporting of data and findings. PAQIA leadership shares all report results with staff from the impacted administrations. During debriefing sessions, staff identify strategies for areas in need of improvement.

During FY 2020, CFSA created a Program Outcomes Unit that focuses on data analysis at the program level. The unit, which is in the Office of the Director, is comprised of data analysts assigned to Agency program areas, who partner with PAQIA to focus on system-level analyses. PAQIA and the Planning Unit (both within OPPPS), staff from CFSA's Child Information System Administration (CISA), the Program Outcomes Unit, and any other data analysts from the program areas all cooperatively use Agency data to share goals and activities, and to assess outcomes for children and families in the District's child welfare system. See the Appendix for details on the multiple units and personnel within CFSA that support CQI efforts.

Finish Line Meetings

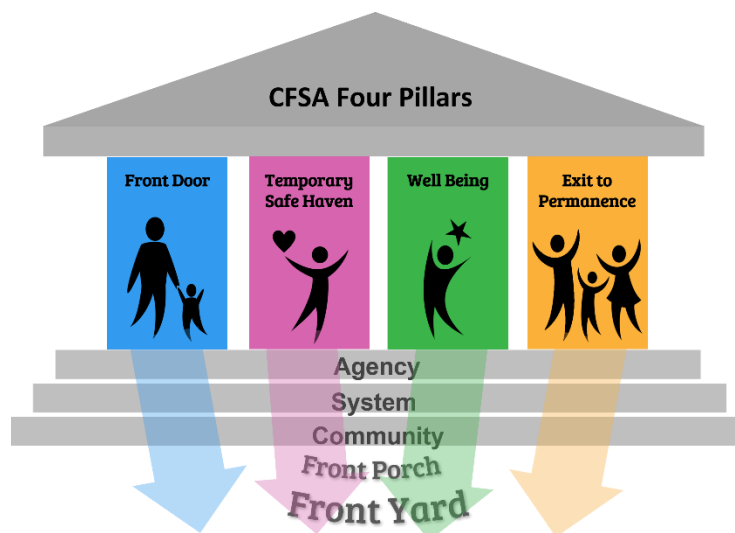
With support from the Program Outcomes Unit and PAQIA, each month the program management staff analyze data specific to monthly performance benchmarks. During "The Finish Line" monthly meeting, program managers from Entry Services, Program Operations, and OPPPS serve as "Data Champions" who present the collected information to a panel of CFSA leadership (deputy directors and the chief of staff). In addition to presenting the data, the champions answer questions posed by the leadership panel and facilitate discussion of strategies used to improve performance, as needed.

CFSA 4 Pillars Huddles

Beginning in FY 2022, the Program Outcomes Unit will add an improvement data forum as part of the Agency's CQI process, called, "4 Pillars Huddles". Supervisory social workers will present information on specific data points that are not included in the monthly Finish Line meetings. The purpose of these huddles is to ensure that leadership consistently receives input and insight from the front-line staff, and by extension, also builds supervisory capacity.

FSA Four Pillars Strategic Framework

CFSA's strategic agenda, known as the *Four Pillars*, guides efforts to improve outcomes for children, youth, and families at every step in their involvement with the District's child welfare system. Each pillar has a values-based foundation, a set of evidence-based strategies, and a series of specific outcome targets.



Front Door

Children deserve to grow up with their families and should be removed from their birth homes only as the last resort. Child welfare gets involved only when families cannot or will not take care of children themselves. When we must remove a child for safety, we seek to place with relatives first.

Temporary Safe Haven

Foster care is a good interim place for children to live while we work to get them back to a permanent home as quickly as possible. Planning for a safe exit begins as soon as a child enters the system.

Well-Being

Every child has a right to a nurturing environment that supports healthy growth and development, good physical and mental health, and academic achievement. Institutions don't make good parents. But when we must bring children into care for their safety, we give them excellent support.

Exit to Permanence

Every child and youth exit foster care as quickly as possible for a safe, well-supported family environment or life-long connection. Older youth have the skills they need to succeed as adults.

METHODOLOGY

The primary data sources used for this report include but are not limited to the following:

- CFSA's statewide automated child welfare information system (SACWIS), which is known locally as FACES.NET and is the central repository for all client-level information
- Manual databases to capture program-specific information
- Qualitative case reviews and quantitative analysis

During the *LaShawn* settlement negotiations, the plaintiff (A Better Childhood), CSSP, and CFSA agreed upon the benchmarks and targets to be included in this report. To inform the Phase 1 Four Pillars Performance Report, PAQIA and the Program Outcomes Unit used multiple quantitative and qualitative data sources. The tracking of these metrics involves a robust CQI process to review data on a broader scope, to make meaning of the data, and to develop and assess strategies to address identified barriers to ongoing improvement. During this period, CSSP as the IVA collaborated with CFSA staff on several of the data collection and analysis strategies.

CFSA conducted the following reviews in partnership with the IVA

- **Assessment of Quality of Investigations:** CFSA and the IVA conducted a case record review of a statistically significant sample of Child Protective Services (CPS) investigations that closed in March 2021. This review specifically focused on the quality of CFSA's investigative practice.
- **Timely Initiation of Investigations:** CFSA and the IVA conducted a case record review of all investigations that closed in February 2021 and in May 2021. This review focused on investigations in which contact was not made with all alleged victim children within 48 hours of the referral to the Hotline. The review specifically assessed whether CPS completed necessary efforts and documented attempts to locate and complete in-person interviews with the victim children within mandated timeframes.
- **Quality Service Reviews:** As had been described by CSSP in their monitoring reports, the "Quality Service Review (QSR) process is a case-based qualitative review that requires interviews with the key stakeholders working and familiar with the child and family whose case is under review. Using a structured protocol, trained QSR reviewers interview the focus child, caregivers, and stakeholders, in addition to reviewing case documentation from FACES.NET. Reviewers then synthesize the information gathered and rate the child and family's functioning status as well as system performance to support the child and family. Reviewers provide direct feedback to social workers and supervisors prior to submitting a written summary of findings to expand and justify QSR ratings. QSR reviewers complete the reviews on cases currently open with CFSA's In-Home Administration, Program Operations Administration (Permanency and the Office of Youth Empowerment), and each of the CFSA-contracted providers case managing

children in foster care”.² QSR reviewers include staff from CFSA, the IVA and trained consultant reviewers. Once the QSR Unit completes the reviews of sample cases from a designated program area, a QSR Exit Conference is held with all staff members in that administration, Agency leadership, and the IVA. The Exit Conference provides all participants with a summary of the reviewed administration’s QSR results, areas of strength and opportunities for improvement. Before concluding the conference, the administration or private agency begins identifying their performance improvement strategies and goals for the following year.

CFSA conducted the following reviews independently with IVA validating the data

- **Welcome Call Review:** CFSA completed a case record review of a statistically significant sample of applicable cases for children newly placed in foster care or experiencing a placement change during May 2021. The review focused on whether Agency staff had conversations with resource parents to assess their needs while caring for the child placed in their home.
- **Community-Based Services Referrals for Low or Moderate Risk Families:** CFSA conducted a case record review of a statistically significant sample of investigations that closed in June and July 2021 with a low or moderate risk assessment level for families. The review focused on referrals for community-based services for these families, and whether families participated in services or not.
- **Visits between Parents and Social Workers and between Parents and Children:** CFSA conducted an internal audit to confirm completion of supervisory-approved necessary efforts for those cases in which visits did not occur.
- **Timely Licensure of Foster and Adoptive Parents:** CFSA reviewed additional information for those resource parents whose licensure took more than 150 days from the onset of training to receiving a license. The review focused on whether delays were due to circumstances outside of the District’s control.

IVA conducted one independent review

- **Extensions for timely closure of investigations: (NEW review for the January to June 2021 reporting period).** The IVA reviewed appropriate approval of extensions for investigations completed over 35 days from the date they were received and for which a supervisor approved an extension.

² CFSA-contracted providers include the National Center for Children and Families for children placed in Maryland and Lutheran Social Services in DC for unaccompanied refugee minors, and the Latin American Youth Center in DC for Spanish-speaking families.

JANUARY – JUNE 2021 PROGRESS OVERVIEW

62% (16 out of 26) of the indicators assessed for the January to June 2021 performance report were either **achieved** or **partially achieved**. Another nine indicators will be due in the next Four Pillars Performance Measurement public report covering July to December 2021 performance.

The Facts

14

Achieved

2

**Partially
Achieved**

10

**Not
Achieved**

9

Not Yet Due

Key CQI Initiatives



Finish Line

Program managers present data specific to monthly performance benchmarks



Programmatic Qualitative Reviews

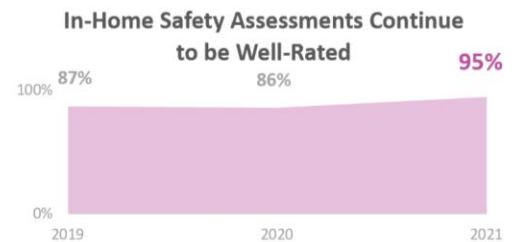
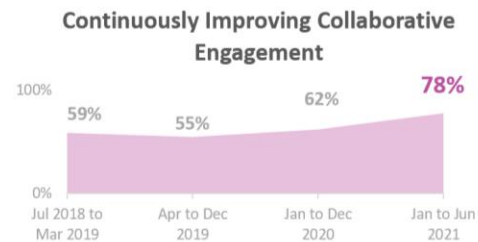
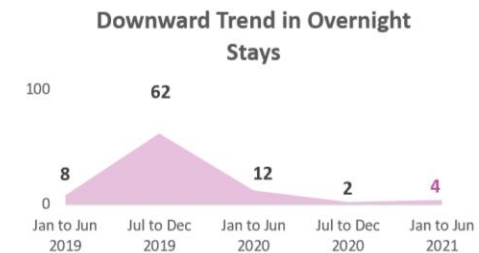
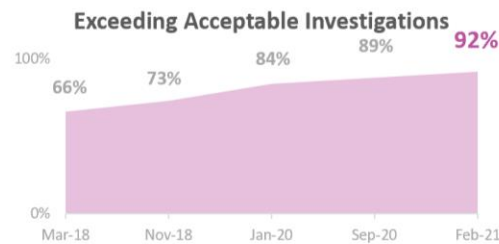
Program areas partner with agency performance team to conduct qualitative reviews to enhance supervisory capacity and complete the continuous quality improvement feedback loop



Four Pillars Huddles

Beginning in FY 2022, supervisory social workers will present information on specific performance measures to ensure that leadership consistently receives insight from the front-line staff

Key Trends



SUMMARY TABLE OF PERFORMANCE

Table 1. Four Pillars Performance

Front Door				
4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
1. Timely Initiations Reporting frequency: Quarterly	95% of all investigations will be initiated within 48 hours	November 2020 performance – 88%	February 2021 performance: 86% (286 of 331 referrals) May 2021 performance: 94% (288 of 307 referrals) ³	No
2. Timely Closure of Investigations Reporting frequency: Monthly	90% of investigations will be completed within 35 days	Monthly range with inclusion of approved extensions: 81 – 94%	Monthly range: 71 – 87% January: 71% February: 78% March: 84% April: 87% May: 81% June: 86%	No
3. Acceptable Investigations Reporting frequency: Bi-annually	80% of investigations will be of acceptable quality	84% of investigations closed in January 2020 were of acceptable quality 89% of investigations closed in September 2020 were of acceptable quality	92% (159 out of 173) of investigations closed in March 2021 were of acceptable quality	Yes

³ To ensure all efforts to initiate an investigation within 48 hours of referral receipt are adequately documented, finalization of data requires a qualitative review. When there are barriers to assessing victim children within the first 48 hours, CFSA conducts these reviews on two months of data gathered within the performance period.

Front Door

4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
<p>4. Child Protective Services Caseloads</p> <p>Reporting frequency: Monthly</p>	<p>90% of investigators and social workers will have caseloads that are not greater than 12 cases. No individual investigator shall have a caseload greater than 15 cases.</p>	<p>Monthly range of 98 – 100% of CPS workers met the caseload requirement.</p> <p>No workers exceeded 15 referrals at any timing during the month.</p>	<p>Monthly range of 98 – 100% of CPS workers met the caseload requirement. No workers exceeded 15 referrals at any timing during the month.</p> <p>January 99%, February: 100%, March: 100%, April: 100%, May: 98%, June: 99%</p>	Yes
<p>5. Collaborative Engagement</p> <p>Reporting frequency: Measure 1: annually Measure 2: annually</p>	<p>Measure 1: 90% of families who have been the subject of a report of abuse and/or neglect, whose circumstances are deemed to place a child in their care at low or moderate risk of abuse and neglect and who are in need of and agree to additional supports shall be referred to an appropriate Collaborative or community agency for follow-up.</p> <p>Measure 2: 90% of families will not have a substantiated report for up to six (6) months post-case closure by the Collaborative.</p>	<p>Measure 1 Performance: 62% of families in July and August 2020 with a closed CPS investigation with low or moderate risk level who were in need of and agreed to services were referred to services.⁴</p> <p>Measure 2 Performance: n/a (CFSA began calculating this measure in FY2020 with the development of the Community Portal).</p>	<p>Measure 1 Performance: 78% of families in June and July 2021 with a closed CPS investigation with low or moderate risk level who were in need of and agreed to services were referred to services.</p> <p>Measure 2 Performance: 94% of families whose collaborative case closed in FY2020 did not have a substantiated report for up to six months post case-closure by the Collaborative.</p>	Partially

⁴ Of the 61 applicable investigations in the sample, reviewers determined that 38 (62%) families were linked to services; 20 of these linkages were through CFSA's community portal to the Collaboratives, and the remaining 18 were either to another community-based service provider or a pre-existing service provider agreed to provide services to meet the unmet need. Of the 23 investigations that were determined to be non-compliant with this measure, in 12 investigations, the reviewer identified a need and the family was not linked, and in 11 investigations, either the worker identified a need or the family requested a service and documentation does not reflect a linkage was made.

Front Door

4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
6. In-Home Caseloads Reporting frequency: Monthly	90% of social workers will have caseloads that are not greater than 15 cases. No individual social worker shall have a caseload greater than 18 cases.	100% of ongoing workers met the caseload requirement each month. No social worker had a caseload of more than 18.	100% of ongoing workers met the caseload requirement each month. No social worker had a caseload of more than 18. January: 100%, February: 100%, March: 100%, April: 100%, May: 100%, June: 100%	Yes
7. New Reports While In-Home Reporting frequency: Bi-annually	No more than 9.5% of open In-Home cases will experience a new substantiated investigation during the current In-Home case.	n/a, methodology changed in 2021	8% of open In-Home cases experienced a new substantiated investigation during the current open In-Home case	Yes
8. Entries from In-Home Reporting frequency: Bi-annually	Reduce foster care entries from In-Home (Annual target: 100)	63 children entering care from an open in-home case (FY2020 Annual)	42 children entering care from an open in-home case Note: data are provided for January-June 2021 only	Not Yet Due
9. Initial Entries to Foster Care Reporting frequency: Bi-annually	Reduce new entries into foster care (Annual target: 185)	172 children with their first entry into foster care (FY2020 Annual)	98 children with their first entry into foster care Note: data are provided for January-June 2021 only	Not Yet Due
10. Re-Entries to Foster Care w/in 12 mo. Reporting frequency: Annually	No more than 8% of entries into foster care will be re-entries.	9.7% 17A-19B ⁵ (with RSP ⁶) 9.3% observed performance (7 out of 75)	6.5% 18A-20B (with RSP) 3.6% observed performance (3 out of 83)	Yes

⁵ The letters A and B relate to the 6-month period AFCARS federal fiscal year reporting period (A = October-March; B = April-September). For example, between October 1, 2016 - September 30, 2019, CFSA achieved the standard (7.8% with RSP). This is also true for the most recent period, October 1, 2017-September 30, 2020 (6.5% with RSP).

⁶ Risk standardized performance (RSP) is used to assess D.C. performance compared to national performance and accounts for factors that influence performance that states have little control over (i.e., age of children in foster care).

Front Door				
4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
11. In-Home safety assessments (QSR)	80% of the in-home sample will have an acceptable rating on two QSR indicators: Child Safety ⁷ and Planning Interventions: Safety/Protection. ⁸	CY2020 performance: 86% rated acceptable (36 out of 42 cases). ⁹	CY2021 performance: 95% rated acceptable (60 out of 63 cases)	Yes

Temporary Safe Haven				
4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
12. Permanency Caseloads Reporting frequency: Monthly	90% of social workers will have caseloads that are not greater than 15 cases. No individual social worker shall have a caseload greater than 18 cases.	Monthly range of 95 – 99% of ongoing workers met the caseload requirement each month. No social worker had a caseload of more than 18.	100% of ongoing workers met the caseload requirement each month. No social worker had a caseload of more than 18.	Yes

⁷ The *Safety* indicator is a Child and Family Status Indicator within the QSR protocol. Safety will be considered “acceptable” when all sub-parts – home, school, community, and other – are considered to be acceptable.

⁸ The *Planning Intervention* sub-part, *Safety and Protection* is a Practice Performance Indicator within the QSR protocol.

⁹ Acceptable performance is based on performance on 2 QSR indicators – all sub-parts of *Safety* (status) and *Planning Interventions: Safety and Protection* (practice indicator). Of the 42 In-Home cases reviewed through the QSR in CY2020, 86% were rated acceptable on both QSR indicators.

Temporary Safe Haven

4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
<p>13. Visits Between Social Workers and Children During the First 4 Weeks of a New Placement or a Placement Change</p> <p>Reporting frequency: Monthly</p>	90% of children newly placed in foster care or experiencing a placement change will have four visits in the first four weeks of a new placement or placement change as described.	<p>a.-c. Monthly range of 76 – 94% of applicable children had the required number of visits following a new placement or placement change.</p> <p>d. In August 2020, 66% of children had documentation indicating that agency staff had a conversation with the resource parent to assess their needs in caring for the child.¹⁰</p>	<p>a.-c. Monthly range of 79 – 91% of applicable children had the required number of visits following a new placement or placement change.</p> <p>January: 91%, February: 85%, March: 91%, April: 90%, May: 88%, June: 79%</p> <p>d. In May 2021, 63% of children (33 of 52) had documentation indicating that agency staff had a conversation with the resource parent to assess their needs in caring for the child.</p>	No
<p>14. Parent/ Child Visits</p> <p>Reporting frequency: Quarterly</p>	80% of children with the goal of reunification will have weekly visitation with the parent with whom reunification is sought.	<p>July 2020 performance: 76%</p> <p>October 2020 performance: 75%^{11,12}</p>	<p>January 2021 performance: 69% (126 out of 314)</p> <p>May 2021 performance: 59% (168 out of 283)</p>	No

¹⁰ These data were collected by CFSA during a case record review of statistically significant sample of applicable cases that month. Performance was not validated by the Monitor.

¹¹ The Monitor validated missed visit effort data for July and October 2020, thus only performance for those months is reported.

¹² To ensure missed visit efforts are adequately documented, finalization of data requires a qualitative review. When weekly parent child visits do not occur but visit efforts are documented, CFSA conducts these reviews on two months of data gathered within the performance period.

Temporary Safe Haven

4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
15. Parent/ Worker Visits Reporting frequency: Monthly	80% of parents will have twice monthly visitation with workers in the first nine months post-placement.	Monthly range of 62 – 79%	Monthly range of 64 – 77% January 2021: 77% (36 out of 47) February 2021: 68% (42 out of 62) March 2021: 66% (50 out of 76) April 2021: 69% (58 out of 84) May 2021: 66% (60 out of 91) June 2021: 67% (72 out of 107)	No
16. Sibling Visits Reporting frequency: Monthly	80% of children shall have monthly visits with their separated siblings and 75% of children shall have twice monthly visits with their separated siblings.		Monthly visits: Monthly range of 88 – 92% Twice monthly visits: Monthly range of 76 – 86% January: monthly: 88%, twice monthly: 76% February: monthly: 92%, twice monthly: 82% March: monthly: 91%, twice monthly: 86% April: monthly 88%, twice monthly 81% May: monthly; 88%, twice monthly: 79% June: monthly: 90%, twice monthly: 85%	Monthly: Yes Twice Monthly: Yes
17. Timely Approval of Foster/Adoptive Parents Reporting frequency: Monthly	70% of homes licensed will have been approved and interested parties will have been notified within 150 days.	82% of foster homes licensed between January – December 2020 received their license within 150 days.	79% of foster homes licensed between January – June 2021 received their license within 150 days. ¹³	Yes

¹³ For 9 of the 56 homes considered compliant during the monitoring period, licensure took longer than 150 days due to circumstances that were beyond the District's control.

Temporary Safe Haven

4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
18. Placement array amongst kinship and family foster homes Reporting frequency: Monthly	85% of all placements shall be in a foster home.	80% (FY2020 Annual Performance)	January: 78% February: 79% March: 78% April: 77% May: 77% June: 78%	No
19. Multiple Placements Reporting frequency: Monthly	Children in the below cohorts shall have had two or fewer placements:			Partially: 2 out of 3 cohorts met
	Cohort 1 (8 days and less than 12 months) - 83%	Cohort 1: Between January and December 2020, monthly range of 76 – 81%	Cohort 1: Between January and June 2021, monthly range of 80 – 83% January: 83%, February: 82%, March: 81%, April: 81%, May: 82%, June: 80%	
	Cohort 2 (12 - 23 mo.) - 60%	Cohort 2: Between January and December 2020, monthly range of 60 – 65%	Cohort 2: Between January and June 2021, monthly range of 60 – 63% January: 60%, February: 60%, March: 61%, April: 60%, May: 61%, June: 63%	
	Cohort 3 (24+ mo.) - 75%	Cohort 3: Between January and December 2020, monthly range of 77 – 81%	Cohort 3: Between January and June 2021, monthly range of 81 – 82% Jan: 81%, Feb: 81%, Mar: 82%, Apr: 81%, May: 82%, Jun: 82%	
20. Placement Disruptions Reporting frequency: Monthly	Reduce monthly placement disruptions Target: 35 disruptions each month	n/a – measurement change. Unable to compare datasets	January: 24 February: 23 March: 34 April: 30 May: 20 June: 33	Yes

Temporary Safe Haven

4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
21. Emergency Shelter Reporting frequency: Monthly	No child shall remain in an emergency, short-term or shelter facility or foster home for more than 30 days.	Between January and December 2020, one child was placed in an emergency, short-term or shelter facility or foster home for more than 30 days.	Between January and June 2021, one child was placed in an emergency, short-term or shelter facility or foster home for more than 30 days.	No
22. Overnight Stays Reporting frequency: As occurs	No child shall stay overnight in the CFSA Intake Center or office building.	Between January and December 2020, there were 14 overnight stays at CFSA, experienced by 13 unique children.	Between January and June 2021, there were 4 overnight stays at CFSA, experienced by 4 unique children.	No
23. Out-of-Home Safety assessments (QSR) Reporting Frequency: Annually	80% of the out-of-home sample will have an acceptable rating on two QSR indicators: Child Safety ¹⁴ and Planning Interventions: Safety/Protection. ¹⁵	CYC2020 performance: 98% rated acceptable	n/a	Not Yet Due
24. Services to Families & Children (QSR) Reporting Frequency: Annually	In 80% of cases, appropriate services, including all services identified in a child's or family's safety plan or case plan, shall be offered along with an offer of instruction or assistance to children/families regarding the use of those services. Performance is based on acceptable ratings for all sub-parts of the QSR Supports and Services indicator.	CY2020 performance: 83% rated acceptable. ¹⁶	CY2021: 92% rated acceptable (58 out of 63) Note: this is partial year data, includes only In-Home cases	Not Yet Due

¹⁴ See FN 7.

¹⁵ See FN 8.

¹⁶ Acceptable performance is based on ratings for all sub-parts of the QSR *Supports and Services* indicator.

Temporary Safe Haven

4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
25. Case Planning (QSR) Reporting Frequency: Annually	80% of cases reviewed will achieve an acceptable rating on the Quality Service Reviews (QSR) Planning Intervention Indicator, which focuses on planned strategies and actions through which life changes for a child and family are produced. Performance is based on acceptable ratings for all sub-parts of the QSR Planning Intervention indicator.	CY2020 performance: 91% rated acceptable. ¹⁷	CY2021 Performance: 97% rated acceptable (61 out of 63 cases) Note: this is partial year data, includes only In-Home cases	Not Yet Due

Well-Being

4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
26. Timely Health Exams Reporting frequency: Monthly	85% of children in foster care shall receive a full medical evaluation within 30 days of placement. 95% of children in foster care shall receive a full medical evaluation within 60 days of placement.		Within 30 days: monthly range of 80 – 97% with full medical evaluation January: 97%, February: 83%, March: 94%, April: 80%, May: 90%, June: 89% Within 60 days: monthly range of 90 – 97% with full medical evaluation January: 97%, February: 90%, March: 97%, April: 97%, May: 97%, June: 97%	Yes

¹⁷ Acceptable performance is based on ratings for all sub-parts of the QSR *Planning Interventions* indicator.

Well-Being

4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
27. Timely Dental Exams Reporting frequency: Monthly	75% of children shall receive a full dental evaluation within 60 days of placement.	Within 30 days: monthly range of 21 – 45% with full dental evaluation Within 60 days: monthly range of 32 – 73% with full dental evaluation Within 90 days: monthly range of 53 – 86% with full dental evaluation	Within 60 days: monthly range of 33 – 82% with full dental evaluation January 56% February 64% March 82% April 71% May 42% June 33%	No
28. Graduation from High School Reporting frequency: Annually	70% of 12 th graders in care shall graduate from high school. Summer school and GED programs are included.	69% (FY2020 Annual)	n/a ¹⁸	Not Yet Due
29. Employment or Internship Experiences Reporting frequency: Annually	55% of youth aged 18 years and older shall have an employment or internship experience.	64% (FY2020 Annual)	n/a ¹⁹	Not Yet Due

¹⁸ Partial year data is not included here since data reconciliation and validation is completed on the full year data at the same time. For other measures where partial year data is reported, data reconciliation is not required or is conducted throughout the year to allow for presentations throughout the year.

¹⁹ See FN 18

Exit to Permanence

4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
<p>30. Permanency in 12 Months for:</p> <p>a. Children Entering Foster Care (8 days-11 months)</p> <p>b. Children Entering Foster Care (12 - 23 months)</p> <p>c. Children Entering Foster Care (24+ months)</p> <p>Reporting frequency: Monthly</p>	<p>a. 45% will achieve permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2021.</p> <p>b. 45% will be discharged from foster care to permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2021.</p> <p>c. 40% will be discharged through reunification, adoption, legal guardianship prior to their 21st birthday or by September 30, 2021, whichever is earlier.</p>	<p>a. As of September 30, 2020, 44% of children in this cohort achieved timely permanency.</p> <p>b. As of September 30, 2020, 35% of children in this cohort achieved timely permanency</p> <p>c. As of September 30, 2020, 26% of children in this cohort achieved timely permanency</p>	n/a ²⁰	Not Yet Due
<p>31. Timely adoption: Placement in a pre-adoptive home within 9 mo.</p> <p>Reporting frequency: Bi-annually</p>	80% of children with a goal of adoption will be placed in an approved adoptive placement by the end of the ninth month from when their goal changed to adoption.	n/a	95% (35 out of 37)	Yes
<p>32. Aging out of foster care</p> <p>Reporting frequency: Bi-annually</p>	No more than 15% of youth will age out of foster care.	11% (FY2020 Annual)	6% (9 out of 160)	Yes

²⁰ See FN 18

Exit to Permanence				
4 Pillars Indicator	Standard	Jan – Dec 2020 Performance	Jan – Jun 2021 Performance	Achieved
33. Exiting Care with Stable Housing Reporting frequency: Bi-annually	88% of emancipated children will exit care with stable housing. Exclusions from denominator includes children who are incarcerated or in abscondence on the date their case closes	93% (FY2020 Annual)	100% (6 of 6)	Yes
34. Enrollment in/completing vocational training or a certification program Reporting frequency: Bi-annually	70% of applicable older youth will be enrolled in or would have recently completed vocational training or a certification program.	71% (FY2020 Annual)	63% (5 of 8)	No
35. Graduation from College Reporting frequency: Annually	20% of the children who started college 5 years prior will graduate (i.e. 20% of all children who started college in 2015 should have graduated by 2020)	11% (FY2020 Annual)	n/a ²¹	Not Yet Due

²¹ See FN 18



NARROWING THE FRONT DOOR

For over a decade, CFSA has been on a journey of transformation, moving purposefully away from a system primarily focused on foster care to a system that supports and strengthens families in their communities. As CFSA has increased its investments in community-based prevention and bolstered its partnerships with the District's health and human services agencies, the Agency also experienced a 69 percent reduction in the number of children and youth in foster care from a high of 2,092 in FY 2010 to 648 as of the end of FY 2021's second quarter (Q2). This decline suggests a positive outlook for CFSA as it coincides with a sharp increase in the city's population from about 604,000 in 2010 to 689,545 in 2020, per the data released by the U.S. Census Bureau.²² However, the children who enter foster care are disproportionately children of color (and specifically Black children). In FY 2019, overall, 2.73 children per 1,000 children in the District entered foster care. The entry rate for Black children was 4.7 children per 1,000 children, compared to 0.4 children per 1,000 children for White children.²³

CFSA's prevention activities focus on families at various stages of service needs and involvement with the agency, either in the Front Yard, on the Front Porch, or in the Front Door, as defined in

²²<https://data.census.gov/cedsci/all?q=washington,%20dc>.

²³ Source: Kids Count Data Center (<https://datacenter.kidscount.org/data#DC/3/0/char/0>) and FACES data

Table 2 below. CFSA recognizes these various stages of need based on systemic experience and research that shows, all but for an intervention, that there is the potential for a child to end up in foster care. Key partners in the District’s prevention array are the Healthy Families/Thriving Communities Collaboratives²⁴ (Collaboratives).

Table 2. Primary, Secondary and Tertiary Prevention in CFSA’s Prevention Array

Primary Prevention: Front Yard	Secondary Prevention: Front Porch	Tertiary Prevention: Front Door
<i>Families not known to CFSA</i>	<i>Families known to CFSA without a currently open case</i>	<i>Families known to CFSA with an open case</i>
Families in the Front Yard have no child welfare involvement but nonetheless face challenges that could put them at risk of coming to the Agency’s attention. Two primary examples of Front Yard families include young parents (under age 25) with young children (birth-6) experiencing homelessness and grandparents responsible for caring for their children’s children. Although these families are not currently connected to the child welfare system, they may be connected to one of CFSA’s five contracted community-based Collaboratives, 10 Family Success Centers, or six Community-Based Child Abuse Prevention (CBCAP) partners. Families may also be receiving stipends through the Grandparent Caregivers or Close Relative Caregivers Program.	Families on the Front Porch have experienced a Child Protective Services (CPS) investigation or open case, but the investigation or case has closed, and families are now receiving services to care for their children safely in the community, without CFSA involvement.	Families at the Front Door include those with either an open In-Home case working toward case closure or with an open Family Court-involved Out-of-Home (foster care) case working toward reunification. At times, families may have short-term needs requiring additional community-based supports provided by a Collaborative. Collaboratives provide these specific services and team with the CFSA social worker to support the successful closure of the CFSA case.

²⁴ The Collaboratives are strategically located in five neighborhoods in the District that have high representation of families in contact with the child welfare system. CFSA co-locates social workers and community-based nurses to serve the local neighborhoods.

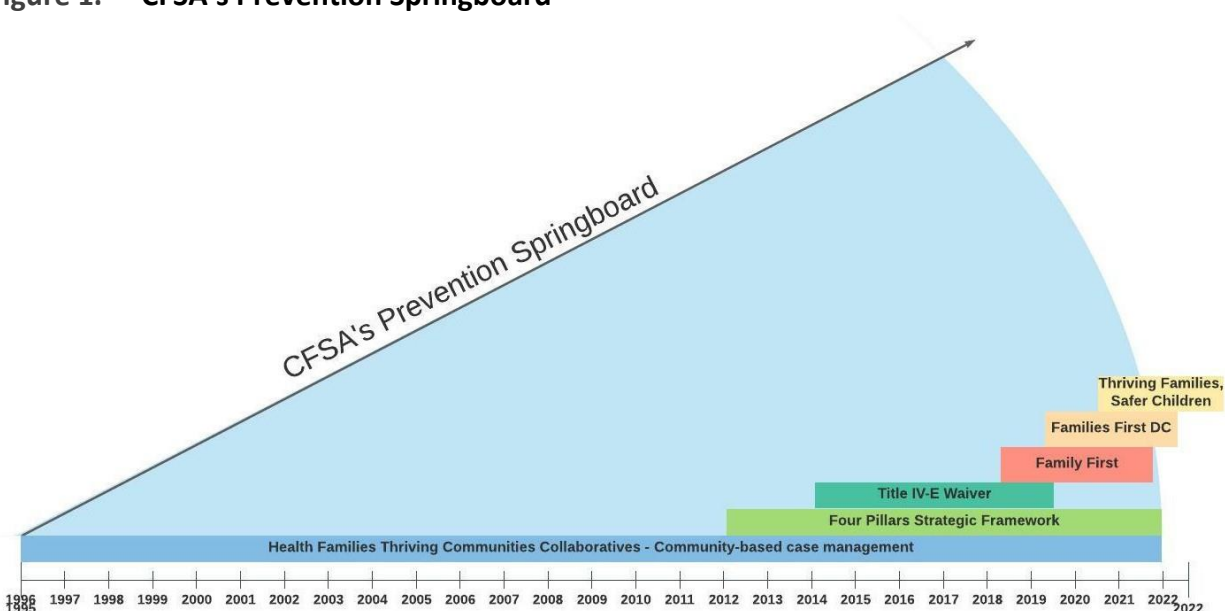
In October 2019, the District became the first jurisdiction in the nation to receive federal approval for a child welfare Title IV-E Prevention Plan. This approval allowed CFSA to smoothly transition from the Title IV-E Waiver Demonstration Project to federal claiming for eligible evidence-based prevention services under the Family First Prevention Services Act (Family First). The District will continue to modify its plan as appropriate and expand this work. CFSA implemented its Family First plan on October 1, 2019. As required by the law, the Agency subsequently developed family-specific prevention plans for eligible families with open CFSA cases and families being served by any of the five neighborhood-based Collaboratives who are referred by CFSA.

This prevention work began over 20 years ago with the Agency's partnership with the Healthy Families Thriving/Communities Collaboratives and continues as the springboard to current and future prevention efforts (see Figure 1 below). To prepare for the future, CFSA has focused on the development of programming for families not known to CFSA, including programming through CFSA partnerships with other District human services agencies, non-profit agencies, and the community at large. All programming focuses on strengthening families and preventing families from coming to the attention of and getting directly involved with the District's child welfare system. These programming efforts are occurring through Families First DC,²⁵ and through the District's participation in *Thriving Families, Safer Communities*.²⁶

²⁵ Families First DC (FFDC) focuses solely on upstream primary prevention for DC residents who reside in vulnerable communities. Supported by local dollars, Mayor Muriel Bowser's vision builds upon work derived from the Family First Prevention Plan but with the intent to provide families with what they need in their communities to avoid ever having to reach CFSA for a formal intervention. FFDC was implemented at the beginning of FY 2021. This initiative is a neighborhood-based, whole-family approach for serving vulnerable families. The design intentionally disrupts the way services are delivered in 10 neighborhoods in Wards 7 and 8 where barriers to well-being, economic opportunity, and achievement are most acute. Starting in FY 2022, CFSA will expand Families First DC to Ward 5.

²⁶ The District has been selected by the Children's Bureau to join the federal initiative, Systems Change Cohort of the Thriving Families, Safer Children: A National Commitment to Well-being. CFSA's participation in the Thriving Families, Safer Children (TFSC) initiative will allow CFSA and other District agencies to further expand upon the array of services that support families early enough to prevent them from becoming system involved. Through this initiative, the Agency will continue to build on cross-sector relationships to address the root causes of maltreatment of children while working to prevent initial and repeat occurrences, avoid needless family disruption, reduce family and child trauma, and interrupt intergenerational cycles of abuse.

Figure 1. CFSA's Prevention Springboard



While CFSA's prevention efforts include a larger primary prevention array (i.e., families in the Front Yard), the 12-performance metrics in the Front Door Pillar focus on families on the Front Porch and families at the Front Door.

Data trends-Child Protective Services Investigations and Children Served in In-Home

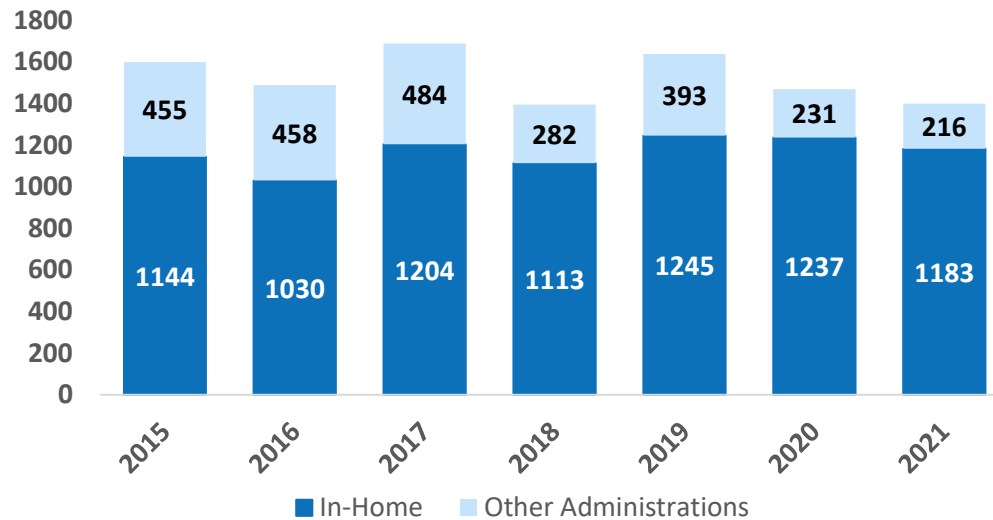
Between January and June 2021, the 24-hour CFSA Child Abuse and Neglect Hotline received 10,765 calls. Of these calls, the Hotline accepted 2,144 for investigation, and 198 that the Hotline worker linked to an already open investigation. The remainder of the calls were entered as Information & Referrals (I&Rs), (i.e., reports that refer the caller for services or activities provided by other public agencies or public service providers), or the Hotline worker screened out the calls, (i.e., the calls did not concern abuse or neglect or did not contain enough information for a CPS response to occur).

During this same time frame, CPS completed investigations on 2,111 referrals. CPS substantiated allegations of maltreatment or risk of maltreatment per District law and policy for 26 percent (n=540) of investigations.

Between 2015 and 2021, CFSA monitored a range of 1,400 to nearly 1,700 children each year residing at home with their biological families. The children served by the In-Home Administration comprise most of these children, with a range of just over 1,000 children served in 2016 to a high of over 1,200 children served in 2017, 2019, and 2020. Children are served by the In-Home Administration whenever there is a substantiated CPS investigation with a high or

intensive risk level but there are no imminent safety risks requiring the separation of children from their biological parents or legal guardians and subsequent placement into foster care. An additional range of 200 to 500 children are served in their homes by other administrations, including within CFSA and private contracted providers. These children have either been reunified with their parents after placement in foster care and are being monitored for a short period of time while in protective supervision status, or their siblings were separated from the biological parent, but the safety risks were not present for all the youth and some children are being monitored in the home.

Figure 2. Children Served In-Home, 2015-2021



The demographics of children served by the In-Home Administration indicate that there are slightly more male children (52 percent) than female children (48 percent). Forty percent of these children are between the ages of 6 to 12, closely followed by 36 percent of children from birth to age 5.

Table 3. Demographics of Children Served In-Home

Gender	Number	Percent
Female	677	48%
Male	722	52%
Total	1399	100%
Race	Number	Percent
American Indian/Alaskan Native	2	0%
Black or African American	1106	79%

Native Hawaiian or Other Pacific Islander	1	<0%
Unable to Determine/Unknown	1	<0%
Unknown	256	18%
White	33	2%
Total	1399	100%
Ethnicity	Number	Percent
Hispanic	143	10%
Non-Hispanic	851	61%
Unknown	405	29%
Total	1399	100%
Age	Number	Percent
Birth to 5	508	36%
6 to 12	562	40%
13 to 17	291	21%
18 to 20	38	3%
Total	1399	100%

There are a total of 11 measures in this section.

The following measures were achieved during this performance period:

- Acceptable Investigations
- CPS Caseloads & In-Home Caseloads
- New Reports While In-Home
- Re-Entries to Foster Care within 12 months
- In-Home Safety Assessments
- The following measure was partially met during this performance period: Collaborative Engagement

The following measures were not met during this performance period:

- Timely Initiations of Investigations (however performance is improving)
- Timely Closures of Investigations

There are also some measures with annual targets. In this report, CFSA has reported progress to date, but achievement of the measure will be calculated in the July-December 2021 report. These measures include:

- Entries into Foster Care from In-Home Cases
- Initial Entries to Foster Care

1. Timely Initiations

Measure

95 percent of all CPS investigations of alleged child abuse and neglect shall be initiated or the documented barriers & next steps to assess child safety shall be discussed within 48 hours after receipt of a report to the Hotline of child maltreatment.

Methodology

To assess performance, CFSA used FACES.NET data to identify whether investigations that closed in February and May 2021 included contact with all alleged victim children within 48 hours. Trained CFSA reviewers and the Independent Verification Agent (IVA) utilized a structured instrument to conduct a case record review of the remaining investigations to assess if CPS made all applicable efforts to initiate the investigation by interviewing or observing all alleged victim children. When investigators met with all children within 48 hours, reviewers automatically classified those cases as “Initiations Met”. Any investigation where investigators did not see all children within 48 hours underwent a qualitative review to determine the initiation status.

2021 Performance

In February 2021, CPS initiated 86 percent of closed investigations within 48 hours of a child maltreatment report received by the Hotline. In May 2021, CPS initiated 94 percent of closed investigations within 48 hours.

Historic Information

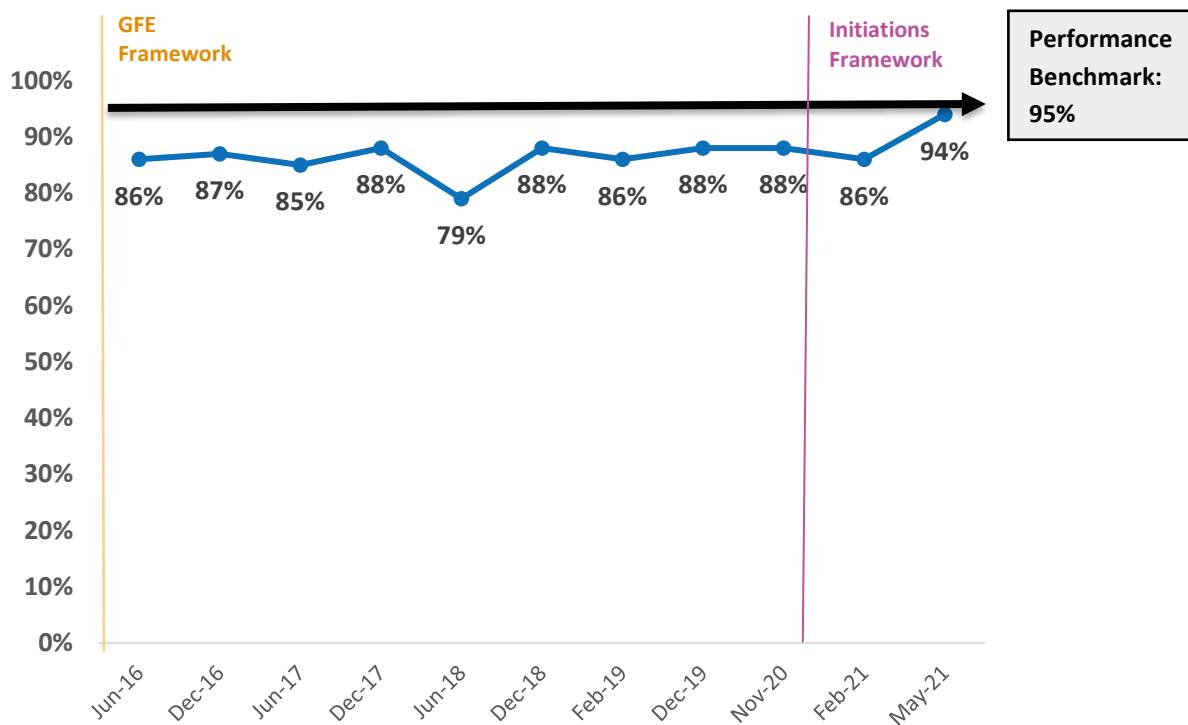
Historically, CFSA did not consider an initiation complete unless a worker had interviewed the alleged victim child outside the presence of the alleged maltreater, or there was documentation of good faith efforts²⁷ to see the alleged victim child when the investigator had been unable to locate the child. Assessing compliance with this standard required measuring specific practice components, i.e., interviewing all alleged victim children alone, and completing the “good faith efforts” checklist.

²⁷ Prior to October 2020, documented good faith efforts to see alleged victim children within the first 48 hours would satisfy this requirement if they included the following documented attempts: (1) visiting the child’s home at different times of the day; (2) visiting the child’s school and/or day care in an attempt to locate the child, if known; (3) contacting the reporter, if known, to gather additional information about the child’s location; (4) reviewing the CFSA information system and other information systems (e.g., ACEDS, STARS) for additional information about the child and family; and (5) contacting the police for all allegations that any child’s safety or health is in immediate danger.

In October 2020, CFSA implemented new practice changes for initiating investigations and assessing child safety within 48 hours of a report. The new practice shifted away from the good faith efforts checklist to utilize clinical decision-making to guide the investigator's efforts to locate and interview children and family within 48 hours of the referral to the Hotline. The practice changes also included more frequent check-ins with supervisors prior to going into and while in the field to support collaborative problem-solving and decision-making. In addition, investigators and supervisors engaged in focused clinical discussions after the close of the 48-hour initiations window to examine any barriers to initiation and to plan next steps to assess the safety and well-being of victim children.

As reflected in Figure 3 below, CFSA has not yet met the required benchmark of 95 percent although performance has continued to improve over time.

Figure 3. Timely Initiation of Investigations, June 2016 – May 2021



Source: CFSA Administrative Data, FACES.NET report INT052 and secondary review of administrative data to validate completion of good faith or otherwise applicable initiation efforts.

Analysis

Of the 331 applicable investigation closures in February 2021, CPS made face-to-face contact with all alleged victim children within 48 hours in 203 investigations (61 percent). In an additional 83 investigations, CPS made necessary efforts to initiate the investigation although contact was not made with all alleged victim children. Thus, total performance for the month was 286 of 331 (86 percent).

Of the 307 applicable investigation closures in May 2021, CPS made face-to-face contact with all alleged victim children within 48 hours in 202 investigations (66 percent). In an additional 86 investigations, CFSA staff made necessary efforts to initiate the investigation although contact was not made with all alleged victim children. Thus, total performance for the month was 288 of 307 (94 percent).

The Agency's internal CQI processes have contributed to performance improvement during this period. The Quality Assurance team within PAQIA leads a debrief with CPS administrators, program managers, and supervisors after each CQI review. A comprehensive report is provided to CPS with the percentage of investigations that were closed within the 48-hour timeframe, the completion rates for assignment consultations and clinical discussions, and barriers to initiation that were identified during clinical discussion meetings. During the debriefs, high-level findings from the review, observations, and recommendations are discussed. CPS identifies next steps after the debrief to address any barriers to timely initiation that were identified during the review.

Although CFSA has not met the benchmark, performance as measured in the February 2021 and May 2021 reviews indicate that practice changes made in October 2020 are supporting improvement. These include increasing supervisory support and incorporating clinical decision-making in the timely initiations rubric versus following a generic checklist to guide efforts to locate and interview children.

Conclusion

CFSA considers this measure not achieved but notes that performance is trending in a positive direction in the last two periods under review and was only one percentage point off from the benchmark in May 2021.

2. Timely Completion of Investigations

Measure

90 percent of investigations will be completed, and a final report of findings shall be entered in FACES.NET within 35 days.

Methodology

To assess performance, CFSA used FACES.NET data to identify which investigations CPS closed within 35 days of the Hotline's acceptance of the referral on a monthly basis. CFSA also collected data on investigations closed beyond 35 days in accordance with supervisory approval for extensions. The following reasons justified extensions with supervisory approval: (a) there was a delay in receipt of critical information; (b) the Hotline received and accepted a new referral for a family with a current, ongoing investigation; (c) the investigator was unable to contact or identify or locate the client; (d) there was law enforcement involvement; (e) the referral was out of CFSA's jurisdiction; or (f) the referral involved a child fatality.

2021 Performance

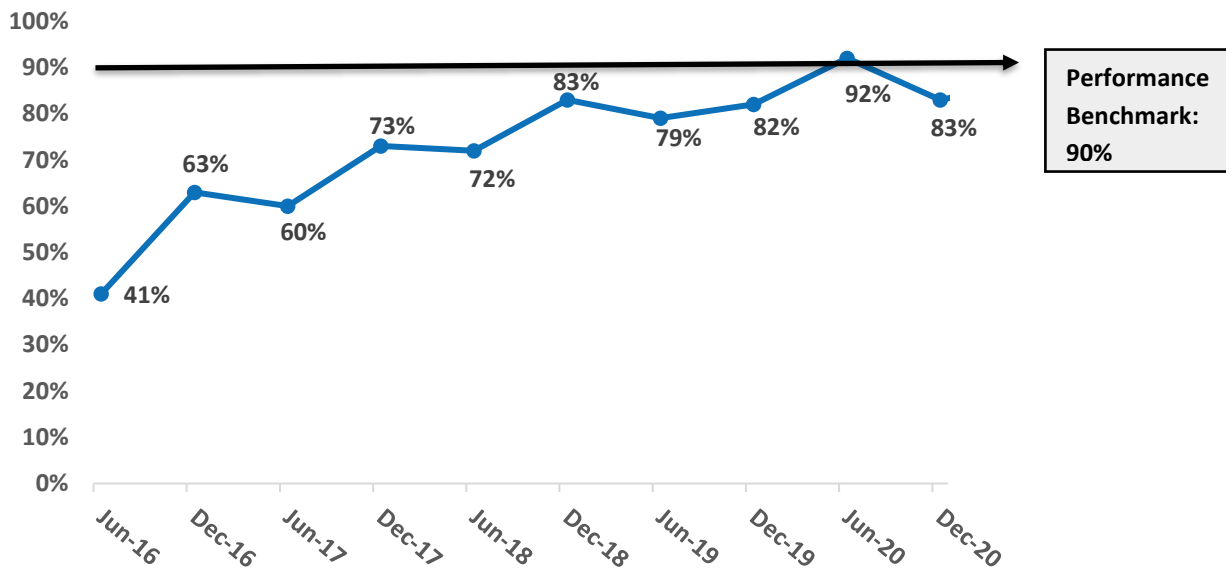
CPS closed a monthly range of 71 to 87 percent of investigations within 35 days.^{28 29}

Historic Information

For CFSA to complete investigations within the specified timeframe, staff must be able to locate, assess and interview all necessary core and collateral contacts³⁰ in a timely fashion, collect relevant evidence, and make prompt decisions regarding the safety of the children promptly.

Data over the last 5 years show consistent improvement, with the most current performance in June 2021 four percentage points away from the benchmark (Figure 4).

Figure 4. Timely Closures, With No Extensions Included, June 2016-December 2020



Source: CFSA Administrative Data, FACES.NET report INV004

Analysis

²⁸ Monthly performance on timely closure of investigations are as follows: January 2021: 71 percent; February 2021: 78 percent; March 2021: 84 percent; April 2021: 87 percent; May 2021, 81 percent; June 2021, 86 percent.

²⁹ The backlog (investigations open longer than 35 days) reported each month are as follows: January 2021, 74; February 2021, 45; March 2021, 44; April 2021, 46; May 2021, 56; June 2021, 63.

³⁰ Core contacts include the victim child(ren), alleged maltreating caregiver(s), and reporter. Collateral contacts include other household members and other individuals who may have pertinent information to the allegations and investigation.

During the January through June 2021 monitoring period, CFSA's monthly performance ranged from 71 to 87 percent for investigation closures within 35 days. CFSA was close to meeting the 90 percent benchmark (within 3 to 4 percentage points) in April 2021 and June 2021.

Figure 5. Timely Closures, With Extensions Included, January-June 2021

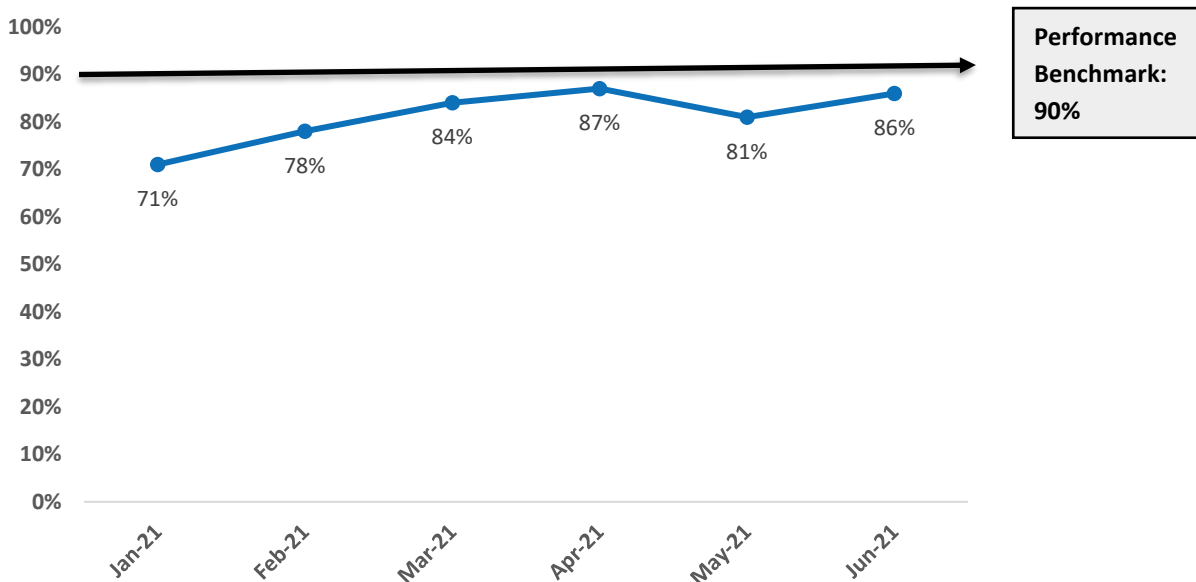


Table 4. Use of Extensions towards Timely Closure, January-June 2021

Month	Investigations Closed within 35 Days	Investigations Closed after 35 Days w/ Extension	Non-Compliant Closed Investigations	Total Closed Investigations
January	235	3	97	335
February	253	4	75	332
March	279	6	54	339
April	312	8	51	371
May	245	3	60	308
June	338	3	57	398

This performance period represents the inaugural inclusion of approved extensions to investigative closure timelines. Extensions are granted by supervisors when there are valid reasons for an investigation to take longer than 35 days to complete. Investigations closed after 35 days with approved, valid extensions accounted for 1-3% of the referrals counted as closed timely during the January-June 2021 period.

Due to the pandemic, several CPS investigators were on partial telework or on full telework while other staff continued to go into the field with protective equipment and safety protocols. CPS also utilized virtual visitation methods (i.e., Zoom, Microsoft Teams, FaceTime, and other platforms) upon the request of families or to follow the safety protocol (i.e., a member of the household was exhibiting symptoms or had been exposed to someone positive for COVID-19). CPS was creative

and conscientious about what activities could be completed by staff on full or partial telework, and which activities were best completed by staff who were able to go into the field. The pandemic staffing issue did negatively impact the number of investigations that closed outside of the 35-day time frame. Additional challenges to accessing the required educational and medical documentation included school and medical office staff not being readily available, either due to alternative telework schedules or being on leave. Additional barriers included the timely scheduling and completion of Child Advocacy Center (CAC) interviews and Child and Adolescent Protection Center (CAPC) interviews when there is alleged physical and/or sexual abuse, offsetting the timely receipt of pertinent information required to close certain investigations. Further, the pandemic impacted CFSA's collaboration with MPD which had its own pandemic challenges with staffing. These challenges also delayed closures of some of the types of investigations whereby the findings of the MPD joint investigation helps to inform a sound CPS disposition. While receipt of critical documentation and law enforcement involvement are approved extension reasons, during this inaugural period of applying extensions not all extensions were entered timely or accurately.

While some barriers to completing investigations in a timely fashion are out of the Agency's control, to ensure the Agency is completing all steps within our control, program managers are holding weekly supervision with supervisors, and supervisors with social workers, to discuss and address barriers for timely closures. Program Outcomes Unit (POU) Analysts also provide CPS supervisors with weekly notification of investigations due within 10 days, as well as mid-week notification follow-up on investigations approaching the timelines for exceeding status. For referrals still open on day 30 and beyond, there are weekly clinical staffings with program managers. In addition, Big RED team meetings occur for referrals exceeding 35 days in order to discuss complicating factors or barriers to closure. During the Big RED team meeting, CPS staff and representatives from the Office of General Counsel attend to discuss the referral and determine the path forward.

Conclusion

CFSA considers this measure not achieved.

3. Acceptable Investigations

Measure

80 percent of investigations will be of acceptable quality as measured by a qualitative review and verified by the IVA.³¹

³¹ Evidence of acceptable investigations includes: (a) use of CFSA's screening tool in prioritizing response times for initiating investigations; (b) interviews with and information obtained from the 5 core contacts – the victim child(ren), the maltreater, the reporting source (when known), medical resources, and educational resources (for school-aged children); (c) interviews with collateral contacts that are likely to provide information about the child's safety and well-being; (d) interviews with all children in the household outside the presence of the caretaker, parents, or caregivers, or documentation, by the social worker, of good-faith efforts to see the child and that the social worker has been unable to locate the child; (e) medical and mental health evaluations of the children or parents when the social worker determines that such evaluations are needed to complete the investigation, except where a parent refuses to consent to such evaluations; (f) use of risk assessment

Methodology

CFSA and the IVA conducted a case record review of a statistically significant sample of CPS investigations closed in March 2021 to assess the quality of investigative practice. Trained reviewers examined a total of 173 investigations, a statistically significant sample with a 95 percent confidence interval and +/- 5 percent margin of error. The review utilized a structured instrument and focused on the following activities: interviews with core witnesses, including the alleged child victim, non-victim children who live in the home, alleged maltreater, and reporter; interviews with collateral witnesses who may have information relevant to the allegations, e.g., law enforcement, other adults in the home, relatives, or neighbors; collection of information regarding the child's health and educational status; assessment of safety and risk; and identification of, and linkage to, services to prevent removal of children from their home.

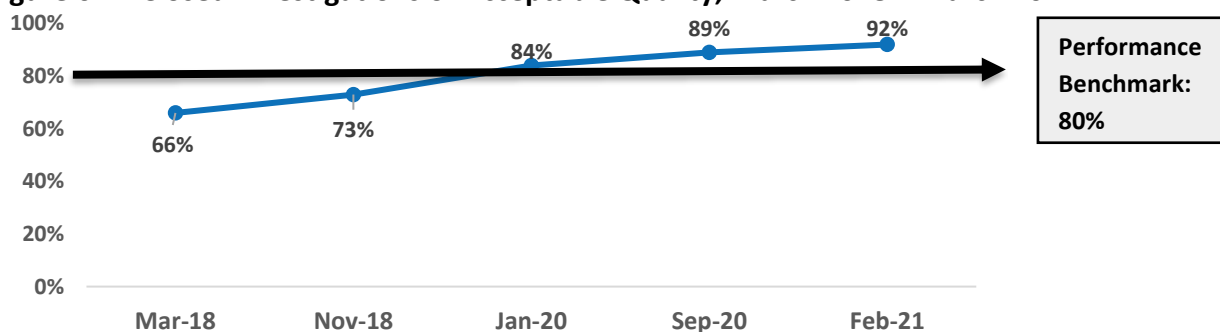
2021 Performance

92 percent of the investigations closed in March 2021 were of acceptable quality.

Historic Information

The 2010 *LaShawn* IEP (IEP I.A.2.) defined the performance standard for acceptable investigations in its current form. In 2012, a case record review of a statistically significant sample³² of cases closed in October 2012 assessed that 62 percent of investigations demonstrated acceptable quality. CFSA began to see an upward trajectory of performance beginning in 2018 from a consistent past of not meeting the benchmark. Performance has significantly improved in recent years, both reaching and exceeding the required level of performance in January 2020 for the first time.

Figure 6. Closed Investigations of Acceptable Quality, March 2018 – March 2021



Analysis

CFSA has continued to meet the required Exit Standard of 80 percent for the last three monitoring periods. Performance has improved from 84 percent in January 2020 to 89 percent in September 2020, and to 92 percent in March 2021. Of the 14 investigations determined not to be of acceptable

protocol in making decisions resulting from an investigation; and (g) initiation of services during the investigation to prevent unnecessary removal of children from their homes.

quality in March 2021, the two most frequent reasons³³ for this determination included insufficient information obtained during interviews with core contacts (seven investigations), specifically the alleged maltreater (seven investigations), the alleged victim children (five investigations), school or daycare staff (four investigations), and the reporter (one investigation).³⁴ The second frequent reason included one or more key collateral contacts not being interviewed (seven investigations).³⁵

Conclusion

CFSA considers this measure achieved.

4. Child Protective Services Caseloads

Measure

90 percent of caseworkers conducting investigations of child abuse and/or neglect maintain caseloads of no more than 12 investigations.

Methodology

To assess performance, CFSA used FACES.NET data to determine whether any CPS investigators had a caseload of more than 12 investigations at any point during the month of review.

2021 Performance

A monthly range of 98 to 100 percent of social workers met the caseload requirements monthly during January through June 2021.

Historic Information

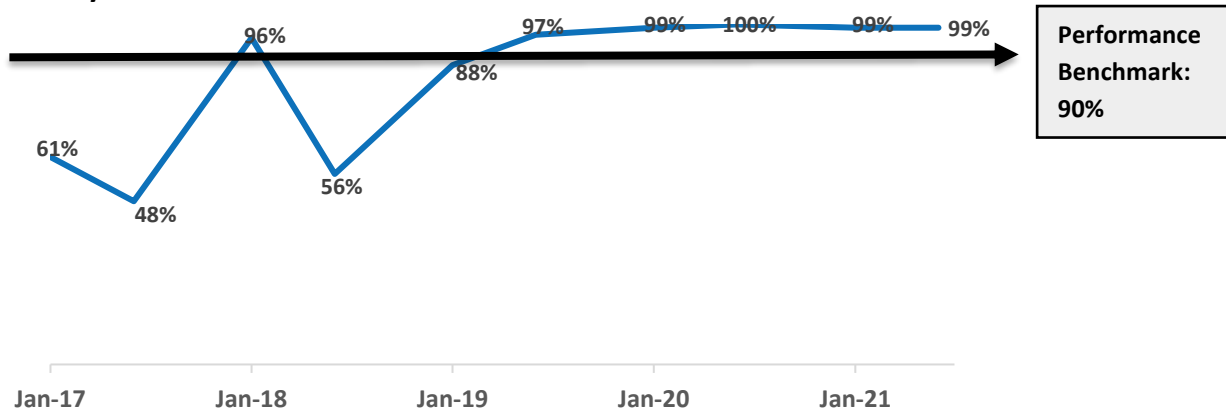
Between 2017-2019, CFSA struggled to consistently achieve this measure. Further analysis identified that staffing was inadequate to account for when staff were out on unexpected leave and when staff resigned. Adequate staffing is critical for the CPS unit due to need to assign all screened in referrals to investigative social workers on a daily basis, the need to initiate investigations within 48 hours, and the need to close referrals within 35 days. Therefore, the agency hired additional staff and created two additional units to increase capacity. CFSA has now met and exceeded this standard for the last three monitoring periods.

³³ Reviewers can provide more than one reason for an unacceptable determination.

³⁴ The most frequent reasons why interviews with core contacts were insufficient include: (a) interview with a person key to providing information on the allegation did not occur (six); (b) the social worker did not follow up to clarify when conflicting information was received in different interviews (four); (c) one or more allegations were not addressed in interviews (three); (d) the social worker was unable to fully engage due to COVID-19 related concerns (one); and (e) despite concerns of educational or medical neglect, there were no efforts to engage with education and medical contacts beyond obtaining required documents (one).

³⁵ The most frequent types of collateral contacts not interviewed include: (a) relatives who do not live in the household (ten); (b) other adult household members (six); (c) other, e.g., father's girlfriend, fictive kin, ex-wife, mom's ex-boyfriend (four); (d) non-offending parent (four); (e) mental health professional (four); (f) teacher, educational resource, or child care provider (two); (g) community service provider (two); (h) law enforcement (two); (i) non-offending caregiver (two); (j) current or former social worker (one); (k) medical professional (one); and (l) family friend (one).

Figure 7. Percentage of CPS Workers Who Met Exit Standard Requirement for Caseloads, January 2017 – June 2021

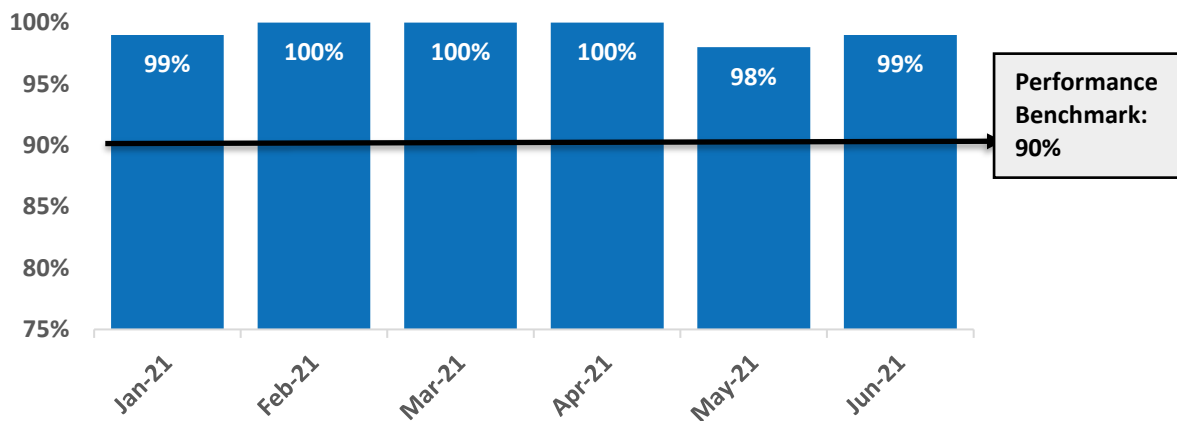


Source: CFSA Administrative Data, FACES.NET report INV145

Analysis

A monthly range of 98 to 100 percent of CPS social workers met the required level of performance during this reporting period. During January-June 2021, CFSA continues to have adequate capacity of CPS staff to maintain appropriate caseloads, despite any unexpected staffing situations that may arise.

Figure 8. Percentage of CPS Workers Who Met Exit Standard Requirements for Caseloads, January-June 2021



Source: CFSA Administrative Data, FACES.NET report INV145

Conclusion

CFSA considers this measure achieved.

5. Collaborative Engagement

Measure

Measure 1: 90 percent of families who have been the subject of a report of abuse and/or neglect, whose circumstances are deemed to place a child in their care at low or moderate risk of abuse and neglect and who need and agree to additional supports shall be referred to an appropriate Collaborative or community agency for follow-up.

Measure 2: 90 percent of families will not have a substantiated report for up to 6 months post-case closure by the Collaborative.

Methodology

Measure 1: To assess performance, reviewers used data from FACES.NET to examine a statistically significant random sample (n=188) of investigations that closed in June and July 2021 with a low or moderate risk assessment level using a 95 percent confidence interval (i.e., +/- 5 percent margin of error.) From this sample, Quality Assurance and program staff counted those investigations with a referral tracked in the Community Portal³⁶ (n=22) as compliant with the measure and not subject to further review.

Staff individually reviewed documentation (i.e., FACES.NET contact notes) in each remaining investigation to determine whether: (1) the investigator or family identified a service need during the investigation, (2) the family agreed to accept a referral for services, and (3) the Agency linked that family to an appropriate service provider. Staff removed investigations from the sample whenever an investigator, family or reviewer indicated no need for services. The final analysis included investigations in which a reviewer identified a service need not identified by the investigator or the family (n=9). Reviewers considered those investigations as not compliant with the measure.

The denominator consists of all investigations in which an investigator or family identified a service need during the investigation and the family agreed to the service need, or the reviewer identified the need during the review process. The numerator (i.e., those considered compliant for this measure) is the number of investigations where the investigator documented the family's agreement to a service referral and the Agency linked the family to an appropriate provider to meet the identified needs, to include when an existing service provider agreed to meet a newly identified need. Reviewers counted investigations as compliant with the measure whenever the Community Portal included a tracking of the service referrals. Reviewers added these investigations both to the denominator and numerator in the final measurement analysis.

Measure 2: The goal of this measure is to assess the effectiveness of Collaborative services in preventing further child abuse and neglect. Using the Community Portal as the data source, the denominator for this measure is a total of 201 case closures in FY 2020 (October 2019-September 2020). The case closures include referrals to the Collaboratives from investigations that closed with low or moderate risk assessment levels and families who were previously receiving In-Home or Out-Of-Home services and who were referred to the Collaborative for step-down services upon the closure of their CFSA case. Based on administrative data from FACES.NET, the numerator for this

³⁶ The Community Portal is a shared database between CFSA and the collaboratives that was introduced in October 2019 with the advent of Family First.

measure is families with a referral and substantiated CPS allegations for at least one child of the family within 6 months of Collaborative case closure. The analysis included referral information through March 31, 2021 to allow the full 6-months to pass for Collaborative cases that closed at the end of the fiscal year. The Community Partnerships Evaluation and Data Analysis Unit performed a cross-match between the records for all individuals associated with closed Collaborative cases and with substantiated CPS allegations. For any families that were present on both lists, the analysis calculated the time between the Collaborative case closure and the substantiated referrals. The numerator includes all families with a substantiation within 6-months of case closure.

2021 Performance

Measure 1 Performance: CFSA referred families to services in June and July 2021 for 78 percent (n=52) of families with a closed CPS investigation and with low or moderate risk level who needed and agreed to services.

Measure 2 Performance: 94 percent of families (188 out of 201 families) whose Collaborative case closed in FY 2020 did not have a substantiated report for up to 6-months post case-closure by the Collaborative.

Historic Information

The previous review for Measure 1 examined families with CPS investigations closed in July and August 2020. During that review, 62 percent of families with a low or moderate risk level who needed and agreed to services received referrals to those services. Current performance demonstrates an upward trend.

CFSA is still determining the baseline performance for Measure 2. With the implementation of Family First, and introduction of the Community Portal to improve data tracking between CFSA and the Healthy Families Thriving Communities Collaboratives, the data quality has improved to such an extent that the Agency is now able to track and calculate these data for the first time.

Measure 2 Performance: Not applicable since CFSA began calculating this measure in FY 2020 with the development of the Community Portal.

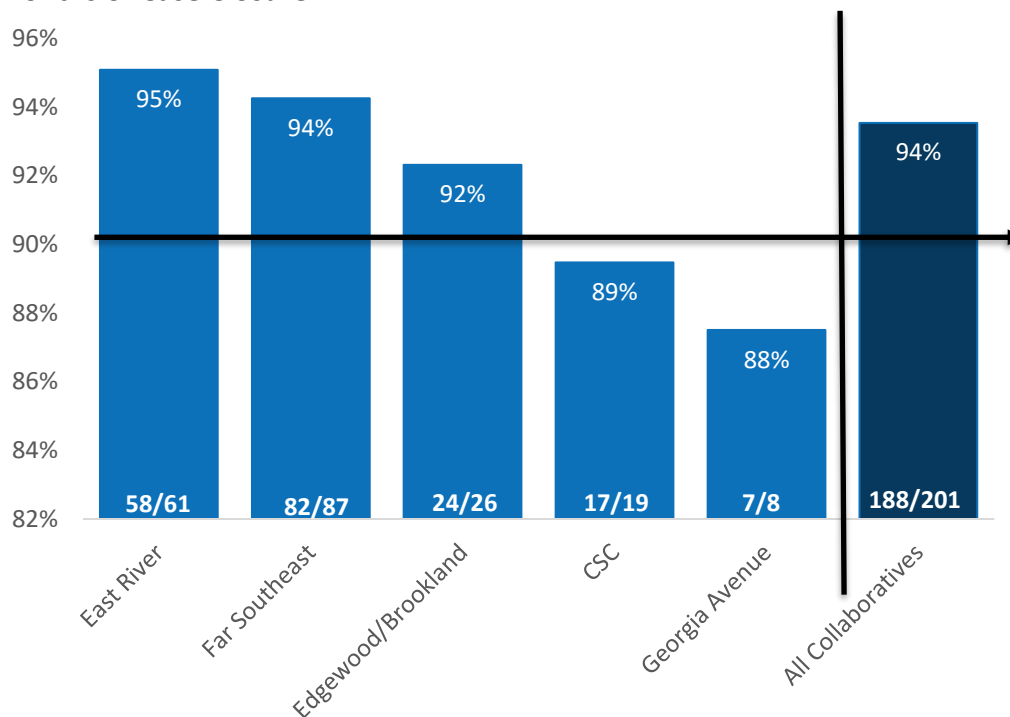
Analysis

Measure 1: The June/July 2021 review indicated a significant improvement (16 percentage points) for this measure over the July/August 2020 review (62 percent), indicating that CFSA is linking more families to the Collaboratives or a community-based service provider for follow-up services. Although the data fall short of the 90 percent benchmark, the 2021 review revealed a 10 percentage-point increase in the number of investigations where investigators and families identified needed service referrals during the investigations from July/August 2020 to June/July 2021 (78 percent and 88 percent, respectively). Both reviews indicated an improvement in the assessment of needs, and specifically that the most identified and the most linked service needs were mental health service for both children and adults.

Measure 2: The data show that overall, the Collaboratives are meeting a primary goal to prevent child abuse and neglect, including during the COVID-19 pandemic that began midway through the

base year (March 2020). In addition to calculating the overall number of families with a substantiation in the 6 months following Collaborative case closure, CFSA also analyzed the data by each individual Collaborative. These results showed variation by Collaboratives. Individually, East of the River Family Strengthening Collaborative (ERFSC), Far Southeast Family Strengthening Collaborative (FSFSC) and Edgewood/Brookland Family Support Collaborative (EBFSC) met the benchmark. Collaborative Solutions for Communities (CSC) and Georgia Ave Family Support Collaborative (GAFSC) fell slightly below the 90 percent benchmark (at 89 percent and 87 percent, respectively).

Figure 9. Percentage of Collaborative Cases without Substantiated Referrals Within 6 Months of Case Closure



CFSA believes the fluctuation of individual Collaboratives in meeting the benchmark is not significant. Rather, the fluctuation represents the wide range in the numbers of families referred to the Collaboratives from CPS and from In-Home and Out-of-Home step-down cases, and therefore also represents the number of cases that may close each year. For example, CSC closed 19 cases that had originated from CPS referrals, In-Home step-down cases, and Out-of-Home step-down cases in FY 2020, and GAFSC closed 8 cases originating from the CPS and from In-Home step-down and Out-of-Home step-down cases. CPS substantiated two families from CSC and one family from GAFSC for abuse or neglect within 6 months after the Collaborative case closed. In comparison, the other three Collaboratives closed a higher number of cases with a range between 26 (EBFSC) to a high of 87 cases (FSFSC). Out of the total 201 Collaborative cases that were closed in FY 2020, CPS substantiated a total of 13 families for abuse or neglect within the first 6 months after the Collaborative case closed.

Conclusion

CFSA considers this measure partially achieved.

6 & 12. Ongoing Caseloads

In-Home Caseloads & Permanency Caseloads

Measure

The caseload of each social worker providing services to children and families in which the child or children in the family are living in their home shall not exceed 1:15 families.

The caseload of each social worker providing services to children in placement, including children in emergency care and children in any other form of CFSA physical custody shall not exceed 1:15 children for children in foster care.

90 percent of social workers will have caseloads that meet the above caseload requirements. No individual social worker shall have a caseload greater than 18 cases.

Methodology

To assess performance, CFSA uses data from FACES.NET.

2021 Performance

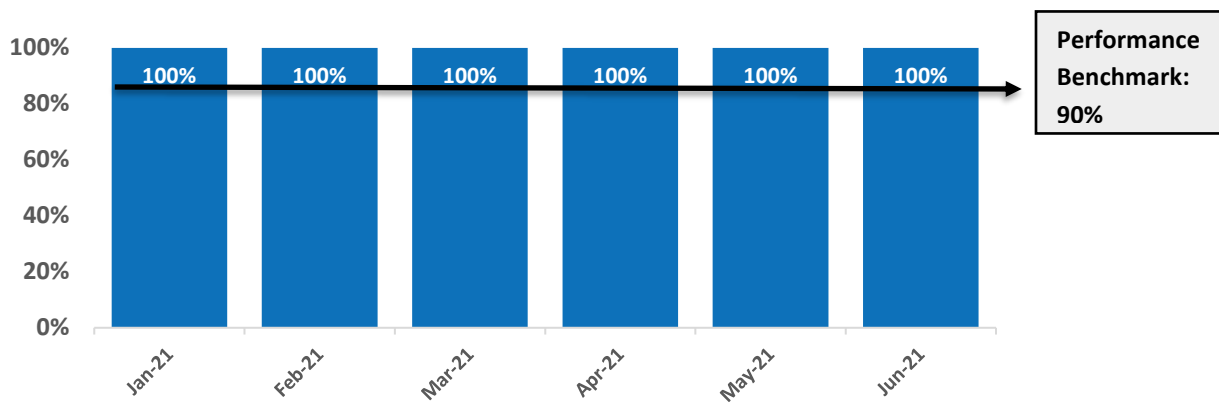
100 percent of ongoing social workers met the caseload requirement each month and no individual social worker had a caseload of more than 18.

Historic Information

Maintaining manageable caseloads allows social workers to engage and provide interventions and supports in a timely manner, and to assess the families for needed services to ensure safety and well-being.

Having sufficient staff to maintain caseloads for the In-Home and Permanency Administration in accordance with caseload standards is a fundamental pre-requisite to good practice and outcomes. The Agency has exceeded performance on this measure, and the caseload requirement for the last three reporting periods.

**Figure 10. Percentage of Ongoing Social Workers Who Met Requirement for Caseloads
January 2021 – June 2021**



Analysis

Each month, 100 percent of ongoing social workers maintained a caseload ratio of 1:15, with no social workers carrying more than 18 cases. The ongoing social worker caseloads for over the last 30 months have met and maintained the required level of performance during this January–June 2021 reporting period.

Conclusion

CFSA considers this measure achieved.

7. New Report of Substantiated Abuse or Neglect While Being Served In-Home

Measure

No more than 9.5 percent of open In-Home cases will experience a new substantiated investigation during the current In-Home case.

Methodology

The numerator is the number of unique families who have had a new substantiated report while they have an open In-Home case. If a family has more than one additional substantiated investigation, they will only be counted in the numerator once. The denominator is the cumulative number of families served by the CFSA In-Home Administration from January-June 2021.

2021 Performance

Eight percent of open In-Home cases (51 out of 622 families) experienced a new substantiated investigation during their open In-Home case in January-June 2021.

Historic Information

The methodology changed in January 2021 to include the cumulative number of families served by In-Home Administration rather than the point-in-time number of families served as of the end of the reporting period. The methodology was changed due to a system improvement in Tableau³⁷ that

³⁷ Tableau is a business intelligence platform that is linked to CFSA's Administrative Data and is used for data analysis and visual presentation of data

enabled CFSA to calculate the cumulative number of families and children specifically served by CFSA's In-Home Administration during designated time frames. Previously, CFSA did not have this capability and used point in time data on the number of families and children served. Using the cumulative families served provides a more accurate look at the proportion of families receiving new substantiations than a point in time count. As a result, CFSA does not have historical information to compare this period's performance to the previous period.

Analysis

CFSA looked further at the number of months between when the case first opened and when the referral that led to additional substantiated findings occurred. For 53 percent of the families (n=27), the new referral was made within one day to 3 months of the case open date. Of the 27 families that had a referral within one day to 3 months, 51% (n=14) had a referral within the first month of their case opening. At this point, the social worker is working to build rapport with the family, assess family needs, and develop the case plan and team to assist the family in completing their case plan goals. Forty-two percent of the remaining cases had the new referral within 4 to 12 months of the case opening, distributed across each 3-month interval. Very few families (3 families, 6 percent) received a new substantiated referral more than 13 months after the case open date.

Table 5. Length of Time Between Case Opening and new Substantiated Referral for Families Served by CFSA In-Home Administration, January-June 2021

Timeframe	# of families	% of families
0-3 months	27	53%
4-6 months	5	10%
7-9 months	10	20%
10-12 months	6	12%
13+ months ³⁸	3	6%
Total	51	100%³⁹

When a new CPS investigation leads to additional substantiated findings on open in-home cases, CFSA's In-Home Administration responds to increase the support and services needed by those families to prevent additional substantiations. Any new maltreatment finding prompts the In-Home team to do a thorough assessment of how the new findings impact child safety and case planning. If there are increased concerns around danger and challenges with parental engagement, the In-Home team will explore community papering, where court involvement is sought (although children can remain at home under the legal status of protective supervision). In addition, during all CPS investigations, a standard decision making (SDM) risk assessment tool is completed. If the family's risk level increases because of the investigation findings, the frequency of the In-Home team's monthly contact (level of service) with the family may increase.

³⁸ There was a range of 13-17 months.

³⁹ Total does not equal 100% due to rounding.

For these 51 families, only three families experienced more than one substantiated allegation between January – June 2021. No family experienced more than two substantiated allegations during this time frame. For all three of these families, the two substantiated investigations were clustered close together (within 2 to 3 months), even though they varied in the amount of time from when the case was first opened. In one family, there were additional substantiated investigations, at 1 and 3 months after the case was initially opened. In the second family, the substantiated investigations occurred at 7 and 9 months after the case was first opened. For the third family, the two substantiated investigations during this performance period occurred 14 and 17 months after the case open date. Since In-Home cases generally close in under a year⁴⁰, it is likely that this family had a high level of need which necessitates In-Home involvement beyond 12 months.

Conclusion

CFSA considers this measure achieved.

8. Entries from In-Home

Measure

Reduce foster care entries from In-Home (annual target: 100).

Methodology

This measure is a count of all children separated from their parents and placed in foster care for at least one night while they had an active open case with CFSA's In-Home Administration. This measure was developed to track the frequency with which children served in an In-Home case were separated from their parents and placed in foster care. There are no exclusions based on the length of time the child remained in care, e.g., if the child remained in care for 8 days or less.

2021 Performance

There were 42 entries from In-Home cases in January-June 2021.

Historic Information

In FY 2020, there were 63 entries from In-Home cases with 31 entries occurring in January-June 2020.

In FY 2019, there were 145 entries from In-Home cases with 80 entries occurring in January-June 2019.

Analysis

Halfway through the calendar year, removal rates from in-home cases remain below the rate projected, indicating that CFSA may meet this target of remaining below 100 entries. The Agency's 2021 performance has surpassed the number of entries from In-Home cases for the January-June 2020 period. However, some of these entries in 2020 occurred during the beginning of the COVID-

⁴⁰ Of the 211 cases closed by the In-Home Administration during January-June 2021, 74% (n=156) closed within 12 or fewer months.

19 pandemic, i.e., 4 of the 6 months. During the beginning of the pandemic, practice was impacted as social workers shifted to virtual assessments and distributed tablets and Wi-Fi hotspots to families to enable virtual visitation. Removal rates were also impacted by the large decline in reports of abuse and neglect to the hotline. As a result, the January-June 2020 reporting period is not representative of typical performance. There has been a 48 percent decrease in the number of initial entries during this same time period in FY 2019 (80 entries from In-Home cases in January-June 2019 compared to 42 entries in January-June 2021). At this time, it is unknown whether the annual target will be met. The July-December 2021 Public Performance Report will include a more comprehensive analysis.

Conclusion

This measure is an annual target. The July-December 2021 Public Performance Report will determine achievement.

9. Initial Entries to Foster Care

Measure

Reduce new entries into foster care (annual target: 185).

Methodology

This measure is a count of all children separated from their parents and entering foster care for the first-time during January-June 2021, and who remained in foster care for at least one night. There are no exclusions based on the length of time the child remained in care, e.g., if the child remained in care for 8 days or less.

2021 Performance

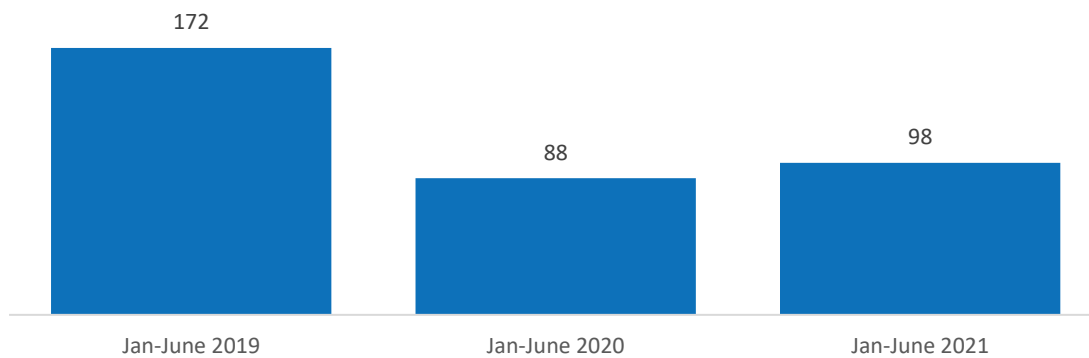
There were 98 initial entries during January-June 2021.

Historic Information

In FY 2020, there were a total of 172 initial entries, with 88 initial entries occurring during January-June 2020.

In FY 2019, there were a total of 307 initial entries, with 172 initial entries occurring during the January-June 2019 timeframe, there were a total of 172 initial entries.

Figure 11. Initial Entries to Foster Care during January-June, 2019-2021



Analysis

Halfway through the calendar year, performance is at 53 percent of the benchmark, indicating that CFSA may meet the annual target of remaining below 185 initial entries. Performance for the first six months of 2021 exceeded the number of initial entries into care for the January-June 2020 period. However, performance during 4 of these 6 months for 2020 occurred at the beginning of the COVID-19 pandemic and is therefore not representative of typical performance, due to the sharp decline in reporting of abuse and neglect to the hotline. There has been a 43 percent decrease in the number of initial entries since the same time in FY 2019. Presently, it is unknown whether the annual target will be surpassed. The July-December 2021 Public Performance Report will include a more comprehensive analysis.

Conclusion

This measure is an annual target. The July-December 2021 Public Performance Report will determine achievement.

10. Re-Entries to Foster Care within 12 months

Measure

No more than 8 percent of entries into foster care will be re-entries.

Methodology

Beginning in 2021, CFSA adopted the federal measure for tracking the Agency's performance on re-entries into foster care. As defined by the federal government, this measure examines, of all children who enter foster care in a 12-month period who were discharged within 12 months to reunification, living with a relative, or guardianship, what percentage re-entered foster care within 12 months of their discharge?

The federal government defines the following exclusions from the measure:⁴¹

- Children in care whose initial foster care episode lasted less than 8 days

⁴¹ Source: <https://capacity.childwelfare.gov/states/resources/reentry-to-foster-care/>

- Children who enter care at age 18 or older
- Children whose discharge from their first foster care episode did not have a discharge reason
- Children who reenter foster care during the same reporting period are excluded, as the Adoption and Foster Care Analysis and Reporting System (AFCARS) reporting structure does not support reporting of the discharge reason
- Children whose date of latest removal for the reentry episode is reported as being before the date of discharge for the prior episode are excluded.
- Children who reenter foster care at age 18 or older are not counted as a reentry into foster care for this measure.

In terms of inclusions, if a child has multiple reentries within 12 months of discharge, only his or her first reentry is selected.

2021 Performance

The Children’s Bureau calculated the information provided for this monitoring period through the Child and Family Services Review (CFSR 3) Data Profile, which is published twice per year and was most recently published in February 2021. The measure examines entries from FY 2018 through the end of FY 2020, incorporating a full 12-month period for children being discharged from care, and gives a full 12-month period for children to re-enter care. In addition to the Children’s Bureau provision of results and supplemental data, CFSA received technical assistance from the Capacity Building Center for States for CFSA to match the federal government’s logic and to pull the data for this measure.

When comparing performance of one state against other states, the federal government applies a risk adjustment to each state’s observed performance. The Child and Family Services Review (CFSR 3) Data Profile provides the following definition for the risk adjustment:

“Risk standardized performance (RSP) is derived from a multilevel statistical model and reflects the state’s performance relative to states with similar children and takes into account the number of children the state served, the age distribution of these children, and for some instances, the state’s entry rate. It uses risk-adjustment to minimize differences in outcomes due to factors over which the state has little control and provides a fairer comparison of state performance against the national performance.”

6.5 percent of FY 2018 entries who exited within 12 months re-entered foster care, with the risk standardized performance (RSP). In observed performance, 3.6 percent (3 out of 83 children) re-entered care.

Since the methodology for the measure gives a full 12-month period for children to achieve permanency after they enter foster care, and then gives an additional 12-month period for children to re-enter care, this is the most recent performance data available.

Historic Information

9.7 percent of FY 2017 entries who exited within 12 months re-entered foster care, with the RSP. In observed performance, 9.3 percent (7 out of 75 children) re-entered care.

7.4 percent of FY 2016 entries who exited within 12 months re-entered foster care, with the RSP. In observed performance, 5.6 percent (5 out of 89 children) re-entered care.

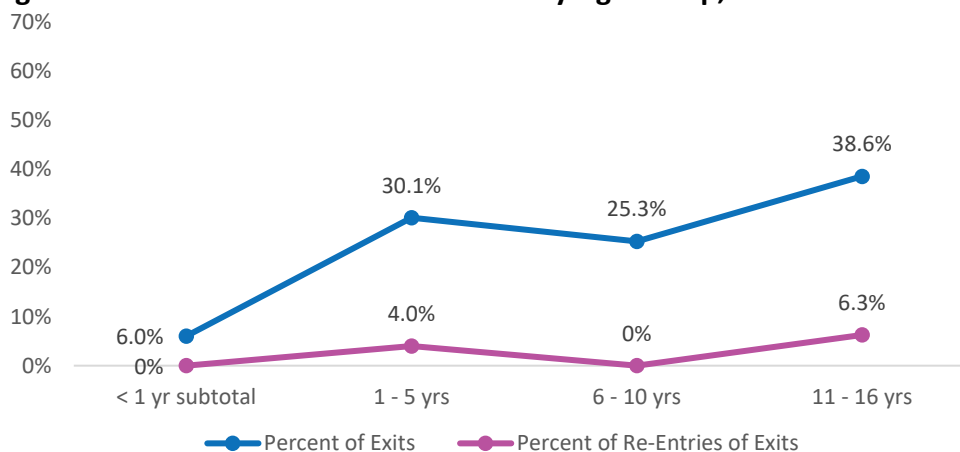
Analysis

The number of children re-entering care has remained below the benchmark for 2 out of the past 3 fiscal years where there are full data available. There was a slight increase among reentries for children who entered care in FY 2017. Throughout all 3 fiscal years, DC performance has been statistically no different than national performance (8.1 percent).

In 2018, of the total exits (n=83)⁴², three children re-entered care. CFSA further analyzed this data by the following age groups: infants (less than 1), children between 1-5, children between 6-10, and children between ages 11-16 years old.

- Infants (less than age 1) represented 6 percent of the FY 2018 entries who were discharged in 12 months (n=5). Of those exits, no children re-entered care.
- Children between the ages of 1 year old to 5 years old, represented 30 percent (n=25). Of those exits, one child re-entered care.
- Children between the ages of 6 years old and 10 represented, 25 percent (n=21). Of those exits, no children re-entered care.
- Children between the ages of 11 years old to 16 years represented 39 percent (n=32). Of those exits two children re-entered care.

Figure 12. Percent of Re-Entries to Care by Age Group, FY 2018 entries



Conclusion

CFSA considers this measure achieved.

11. In-Home Safety Assessments

Measure

⁴² This analysis refers to observed performance, not the RSP performance.

80 percent of cases will have documentation verifying each child was visited and seen outside the presence of the caretaker and that safety was assessed during each visit.

Methodology

To assess annual performance on In-Home cases, CFSA uses ratings from two QSR protocol indicators: Child Safety (Child Status) and Planning Interventions: Safety and Protection (System Performance). For this performance measure to be achieved, QSR reviewers must assess, determine, and rate both indicators as acceptable (indicators are rated on scores of 1-6, scores between 4-6 are rated as acceptable). The QSR Unit and other staff and contracted reviewers review randomly selected In-Home cases throughout the calendar year.

Reviewers base QSR ratings on interviews with social workers, children and parents, and other key stakeholders (i.e., other household members, teachers, service providers). To determine whether Agency practice has met or exceeded this measure's 80 percent benchmark, reviewers examine actual social worker practice and performance. Reviewers also examine documentation to assess practice.

2021 Performance

QSR reviewers rated 95 percent (60 of 63) of the In-Home sample cases as acceptable for both the Child Safety and the Planning Interventions: Safety and Protection indicators.

Historic Information

CFSA has exceeded the benchmark of 80 percent from CY 2019 to CY 2021. In CY 2019, the QSR Unit reviewed 54 In-Home cases, 87 percent (50) of which were rated acceptable for both indicators. In CY 2020, 42 cases were reviewed, 86 percent (36) of which were rated acceptable for both indicators.

Analysis

In CY 2021, overall In-Home practice for this measure surpassed the CY 2019 and CY 2020 ratings by 8 and 9 percentage points (respectively). The overall CY 2021 95 percent (60 of 63) acceptable rating was largely due to an 8-percentage point increase in performance for the system indicator, Planning Interventions: Safety and Protection (System Performance), which was 94 percent (51 of 54 cases) in CY 2019, 90 percent in CY 2020 (38 of 42 cases) and 98 percent acceptable in CY 2021 (62 of 63 cases). For the Child Safety (Child Status) indicator, QSR reviewers rated 97 percent (61 of 63) of the cases as acceptable in CY 2021.

These data reveal that CFSA social workers regularly assess for and ensure children's safety on in-home cases.

Conclusion

CFSA considers this measure achieved.



TEMPORARY SAFE HAVEN

Foster care is a temporary living situation for children whose safety is at imminent risk due to parents or other relatives being unable to provide care. When children enter foster care, CFSA prioritizes family-based foster care, particularly kinship care that provides the most connection to family. CFSA works to have a child's first placement with kin and, when not available, CFSA strives to have the best match with a family-based resource parent.

CFSA prioritizes placement with relatives whenever possible. If relatives are unavailable (or unwilling) to provide care, CFSA will place children in a non-relative, family-based foster home. To a much lesser extent, CFSA may place older youth in congregate care facilities.

Whether a family-based or congregate care setting, the intent of foster care is to provide a temporary safe, stable and caring environment for the child or youth while the parents address the reasons for the family's involvement with the child welfare system. Social workers monitor the safety of children in foster care through weekly visitation for the first four weeks of foster care, and a minimum of twice monthly visits thereafter. Social workers also facilitate visits between parents and children within the first week of foster care, including visits with siblings within 48 hours if the Agency needed to place a sibling group in different foster care placements. The Agency ensures that children and families continue visits with each other at a minimum on a

bi-weekly basis. Social workers also engage and assess parents with a goal of reunification with their children during twice monthly visits.

Social workers utilize these assessment opportunities to partner with the family and develop a case plan that meets the family's unique needs. Together the family and the social worker identify next steps and services that will help the family achieve the identified permanency goal for the child. The preferred permanency goal for children is reunification with their family as quickly (but as safely) as possible. When safe reunification is not possible, CFSA seeks to find a safe and loving, permanent home through adoption or legal guardianship. For older youth, CFSA may determine that the most appropriate goal is Another Planned Permanent Living Arrangement (APPLA). In such cases, the Agency ensures a transition to adulthood with the youth establishing lifelong connections to at least one responsible, nurturing adult.

Overall, the placement array must accommodate the wide variety of needs of the District's foster care population. Some youth will not be able to be initially placed with kin or in a traditional family-based resource home. For some of these youth, they might need the additional structure and round-the-clock support of a group home or a more restrictive level of care to meet therapeutic needs. When a child enters the foster care system and requires observation to determine the most appropriate placement and service needs, CFSA has Stabilization, Observation, Assessment, and Respite Care (SOAR) homes. SOAR homes are professional resource parent homes with two beds each to provide temporary care for up to 90 days. This period of observation allows the Agency to better determine children's needs and therefore to make an informed decision about the placement match that will maximize placement stability.

To successfully achieve placement stability CFSA must also provide strong supports to resource parents and ensure that resource parents have the necessary skills to care for the unique needs of each child placed in their home. To this end, CFSA has created a new business process called, Placement Stabilization Staffings.⁴³ These stabilization staffings focus on children newly entering or re-entering care, as well as for children with certain types of replacements. See the Ongoing Commitment section for more information about these new Placement Stabilization Staffings.

CFSA has made multiple improvements to its placement array to ensure stability. See the Appendix for more information on resources and supports for resource parents that help increase placement stability. CFSA continues to recruit and retain new resource parents through its comprehensive recruitment and retention campaign called REACH (Recruit, Engage, Advocate,

⁴³<https://cfsa.dc.gov/publication/program-placement-matching>

Collaborate, Help). Additional information about this campaign is included in the Ongoing Commitment table below, see Table 6.

There are a total of 14 measures in this section.

The following measures were achieved during this performance period:

- Permanency Caseloads
- Sibling Visits
- Timely Approval of Foster/Adoptive Parents
- Placement Disruptions

The following measures were partially achieved:

- Multiple Placements

The following measures were not achieved during this performance period:

- Visits between social workers and children during the first 4 weeks of a new placement or a placement change
- Parent/Child Visits
- Parent/Worker Visits
- Placement array amongst kinship and family foster homes
- Emergency Shelter
- Overnight Stays

The following measures are not yet due and will be reported on in the July-December 2021 report:

- Out of Home Safety Assessments
- Services to Families and Children
- Case Planning

In addition to the efforts discussed above, the *LaShawn* Settlement Agreement required CFSA to take specific actions in 2020 and 2021 to expand and enhance the placement array. The specific commitments and progress towards implementation are detailed in the table below.

Table 6. Ongoing Commitments

Commitment	Status as of June 30, 2021
<p>Commitment A. CFSA will contract with a provider to develop a specialized psychiatric residential treatment facility (PRTF) within the District for children and youth in foster care.</p> <p>By August 31, 2020, in consultation with the court-appointed monitor and plaintiffs, CFSA will issue a request for proposals (RFP) to solicit a provider responsible both for identifying a site within the District (or not to exceed 50 miles from the District) and developing and operating the residential housing, educational, and treatment program. Proposals to the solicitation will be due by December 31, 2020.</p> <p>In meeting this obligation, CFSA will select a provider with experience working successfully with children with significant behavioral health needs that require placement and treatment in a specialized residential treatment center. The PRTF will meet nationally recognized standards and have a capacity to serve up to eight children between the ages of 8 and 12. The contracted provider will have experience designing, staffing, and operating a residential treatment program with educational programming and evidence-based behavioral health treatment services.</p>	<p>Despite concerted efforts during the procurement process, CFSA encountered challenges identifying a provider to build and develop a local PRTF. CFSA subsequently determined that a less restrictive but still intensive placement solution will appropriately meet the needs of the same population. As a result, CFSA will contract for additional professional resource parents to offer targeted, intensive, and supportive environments that provide the necessary clinical and therapeutic-based services.</p> <p>Per approval of the plaintiff and the IVA, this commitment was replaced by commitment B in the Addendum to the Settlement Agreement and status on that commitment is reported below.</p>
<p>Commitment B. In the Addendum to the Settlement Agreement, this new commitment was added:</p> <p>CFSA will recruit four additional professional resource parents with a minimum of four children, up to a capacity of eight children, ages 8 - 12.</p>	<p>The scope of work was developed in May 2021 and the resource parent type was officially named trauma-informed professional parents (TIPP). By June 1, 2021, CFSA developed promotional materials and began marketing. A total of 26 prospective parents attended the three informational sessions.</p> <p>By September 30, 2021, CFSA selected 4 resource parents with a capacity of 8 beds. The resource parents will be licensed approximately 150 days after selection. CFSA is on track to meet this commitment, by March 2022. As of</p>

Commitment	Status as of June 30, 2021
	<p>December 31, 2021, two of the three TIPP parents are licensed, and a third parent will be licensed by January 15, 2022. The fourth parent who was initially selected withdrew their name from consideration. A replacement parent was selected and will be licensed no later than March 2022.</p>
<p>Commitment C. By December 31, 2020, CFSA will authorize, recruit for and license enough foster care placements to have a 10 percent built-in surplus of foster care beds, thereby creating more matching choices and prompt and appropriate placement for all children in care. CFSA will ensure that this surplus is maintained for the duration of this Settlement Agreement.</p>	<p>CFSA has maintained more than a 10 percent surplus of foster care beds throughout January-June 2021, with the surplus ranging from 23 percent to 32 percent monthly. See the <i>Placement Capacity Compared to Census as of Last Day of the Month</i> report in the appendix for detailed month-by-month information. In calculating capacity, the Agency removed the number of children in kinship homes, and the number of licensed kinship beds as these placements are not typically available for all children in foster care but are licensed to meet a specific placement need for an identified child. This calculation includes the number of homes or providers licensed at a point in time, and does not reflect the number of homes or providers who are available for placements as it does not account for resource parents who are temporarily unavailable due to vacation, home renovations, sickness, etc.</p> <p>CFSA continues to maintain capacity within specialized placement types and for specialized populations. Refer to Table 7 and Table 8 for further information.</p> <p>CFSA completes monthly tracking of the new family-based homes and beds that become available across CFSA and within each of the private contracted providers. CFSA also tracks the number of homes and beds that are closed each month and reason that the home closed. Overall, in FY 2021 through Q3 (June 2021), there were 126 new resource homes licensed with a capacity of 171 beds across the family-based placement continuum. However, 141 homes with a capacity of 215 beds also closed, leading to a net loss of 15 homes and 44 beds. This loss of beds was largely (73 percent loss of homes and 75 percent loss of beds) due to a loss of kinship homes from both CFSA and one of the private contracted providers (total loss of 11 homes, 33 beds), in addition to the loss of traditional homes from a contracted provider. A significant reason for the closure of resource homes was due to the children in the home</p>

Commitment	Status as of June 30, 2021
	<p>achieving permanency (63% of closed homes). This factor applied to 56 kinship homes and 21 non-kinship homes. Moreover, 45 homes closed due to resource parent requests (health issues, family changes, no longer interested, retirement, moved out of DC, concerns for COVID-19 safety issues, etc.).</p>
<p>Commitment D. As part of CFSA's efforts to meet this obligation, by June 15, 2020, CFSA will hire a full-time staff person responsible for developing and carrying out a recruitment plan to identify, license, and maintain a sufficient number of foster care resources to have and maintain the 10 percent built-in surplus of foster care placements.</p> <p>The recruitment plan will focus on traditional family-based homes, as well as specialized placement types (e.g., professional foster parents, SOAR homes,⁴⁴ intensive foster care, placements that can accommodate sibling groups, etc.) to meet children's needs, reduce placement instability, and end overnight stays at the CFSA office building.</p>	<p>CFSA hired the full-time staff member in April 2020. The staff member remains employed at CFSA as of June 30, 2021. CFSA also developed the new comprehensive recruitment and retention campaign called REACH (Recruit, Engage, Advocate, Collaborate, Help).</p> <p>Developed in FY 2020 and launched in early FY 2021, the REACH initiative aims to improve resource parent recruitment and retention by engaging staff and community members to serve as ambassadors. A December 2020 survey helped to determine the inaugural cohort of staff participants; the REACH team began recruiting ambassadors from the DC community in March 2021.</p> <p>The website CFSA uses to recruit new resource parents, FosterDCKids.org has a new look as of February 2021, and features updated content for prospective and current resource parents, including some functions translated into Spanish.. Visitors can meet and contact the recruitment team, register for events, submit applications, and explore resources. As of December 31, 2021, there were 6,729 unique visitors to the FosterDCKids.org website during the calendar year.</p> <p>In addition, resource parents are able to attend "Fellowship and Feedback" sessions to provide feedback, ask questions, or raise concerns directly with Agency leaders. The Deputy Director for Program Operations leads the monthly sessions.</p>

⁴⁴ SOAR (Stabilization, Observation, Assessment, and Respite Care) homes are professional resource parent homes with two beds each to provide temporary care for up to 90 days.

Table 7. Bed Capacity within Specialized Placement Types

Specialized Placement Type	Number of homes	Number of beds	Available Capacity as of 6/30/21
SOAR	2	4	0
Intensive Foster Care ⁴⁵	50	36	9
Professional foster parents for teen parents	3	3	0
SOY	9	21	6

Source: PRD141 and manual data provided by Placement Administration and Contracts Monitoring Division

Table 8. Bed Capacity for Specialized Populations

Specialized Population Type	Number of homes	Number of beds	Available capacity as of 6/30/21
Specializes in working with teens ⁴⁶	91	120	49
Accommodates large sibling groups (3+ children, both kin and non-kin placements)	48	154	50
Speaks Spanish	18	31	10

Source: PRD141 and manual data provided by Placement Administration and Contracts Monitoring Division

DATA TRENDS: CHILDREN IN OUT-OF-HOME PLACEMENT

The number of children placed in foster care continues to decline. Between June 2015 and June 2021, CFSA witnessed a 41 percent decrease (n=1052 and n=623, respectively). See Figure 13 below.

⁴⁵ The Children's Choice contract has a maximum capacity of 36 beds. However, CFSA has access to all the Children's Choice homes across the four sites in Maryland. Once there are 36 beds in use, no further placements can be made until a bed becomes available.

⁴⁶ SOAR, intensive foster care, professional resource parents & SOY (special opportunities for youth) homes receive extra training in parenting teens in foster care; this is an aggregate of these rows from the specialized placement type table for CFSA placements.

Figure 13. Children in Out-of-Home Placement as of June 30, 2015-2021

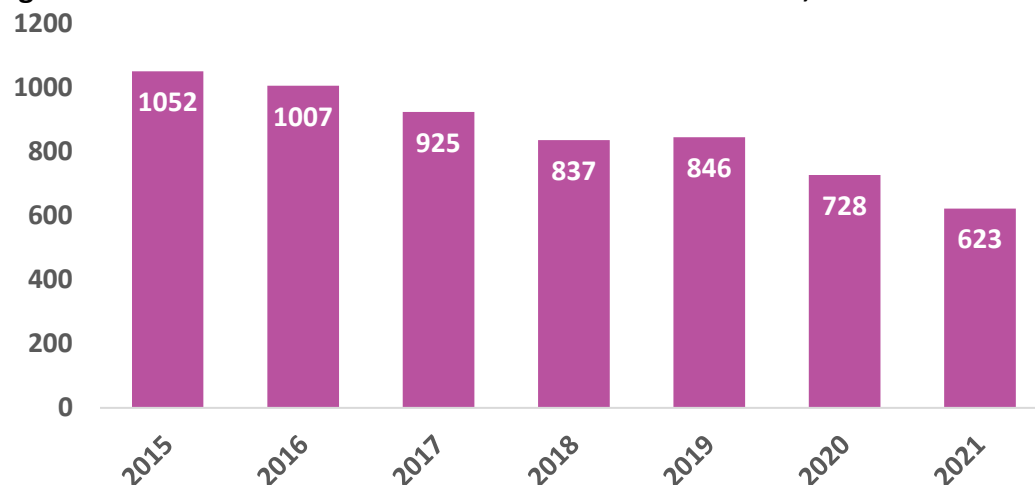


Figure 14 below shows the trends of entries and re-entries into care during the January 2019-to-June 2021 time period. Entries sharply decreased by an average of 35 entries per month in 2019, decreasing to an average of 18 entries per month in 2020. Entries and re-entries in 2021 increased slightly but were still generally lower than entries and re-entries in 2019, with an average of 22 entries per month.

As Figure 14 shows below, monthly entries into foster care were significantly down in 2020 compared to 2019. Entries have risen slightly in 2021 (to date) but still remain lower than entries by month in 2019. While CFSA is not able to quantify it, there is likely an impact from the COVID-19 pandemic and decrease in the volume of calls to the Hotline.

Figure 14. Entries in Foster Care for January-June in 2019-2021

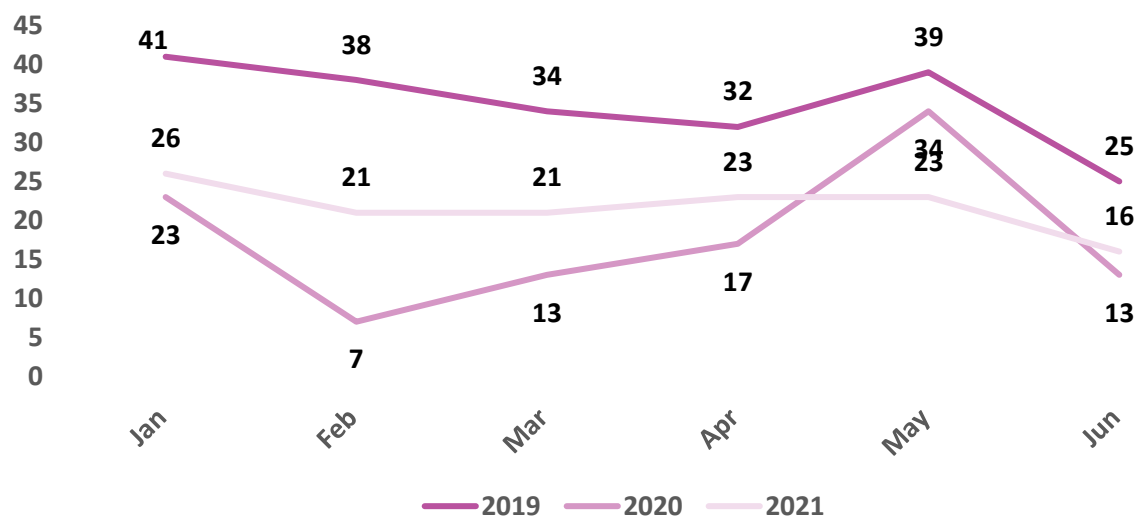


Table 8 below shows basic demographic information for the children in Out-of-Home care as of June 30, 2021. Of the 565 children where race data is reported, African American children account for 97 percent of all children in foster care, overrepresented in the D.C. foster care system per the 2021 racial composition of the District as reported in the 2021 World Population Review (African Americans account for 46.31 percent of the population).⁴⁷ In addition, US Census data (2019) shows that 56 percent of the D.C. population under the age of 18 was African American.⁴⁸ The two largest age groups of children are children between the ages of birth to five (29 percent) and 13 to 17 years old (27 percent).

Table 9. Demographics of Children in Out-of-Home Care⁴⁹

Gender	Number	Percent ⁵⁰
Female	314	50%
Male	309	50%
Total	623	100%
Race	Number	Percent
Asian	3	<0%
Black or African American	549	88%
Native Hawaiian, Other Pacific Islander	1	<0%
White	12	2%
Unable to Determine	3	<0%
No Race Data Reported	55	9%
Total	623	100%
Ethnicity	Number	Percent
Hispanic	97	16%
Non-Hispanic	454	73%
Unable to determine	1	<0%
Unknown	71	11%
Total	623	100%
Age Group	Number	Percent
Birth to 5	180	29%
6 to 12	147	24%

⁴⁷ <https://worldpopulationreview.com/states/district-of-columbia-population>

⁴⁸ Source: US Census Bureau, <https://datacenter.kidscount.org/data/tables/8874-race-ethnicity-of-child-population-by-ward?loc=10&loc=3#detailed/3/any/false/1729/3498,2161,2159,2157,2663,3499,3307,2160|838/17761,17762>

⁴⁹ Note that this table does not include youth who turned 21 during this timeframe but elected to remain in extended stay foster care. These youth are manually added back for the performance measures related to older youth but are not added back for general population information.

⁵⁰ Totals may not add up to 100 percent due to rounding.

13 to 17	170	27%
18 to 20	126	20%
Total	623	100%

Source: CFSA Administrative Data, FACES.NET report PLC256 as of June 30, 2021.

Of the children separated from their homes of origin, 50% of these children were residents of wards 7 and 8. Conversely, the Wards with the smallest number of removals are Ward 2 (n=6), and Ward 3 (n=9), who each comprise 1 percent of the foster care population. Detailed information regarding the placement of children in foster care is provided later in this section.

13. First Four Weekly Visits

Measure

- a) Visits: **90 percent** of children newly placed in foster care or experiencing a placement change will have four visits in the first 4 weeks of a new placement or placement change.
- b) Outreach to Resource Parent: For **90 percent** of children newly placed in foster care or experiencing a placement change, at least one of the visits during the first 4 weeks of a new placement or a placement change shall include a conversation between the social worker and the resource parent to assess assistance needed by the resource parent from the Agency.

Methodology

- a) Visits: To assess performance, CFSA utilizes data from FACES.NET. The universe counts the total number of placements with a placement entry date in the reporting month. The measure utilizes the following logic:
 - Visits Requirements for placements lasting 8-14 days - At least one visit by social worker (SW), family support worker (FSW) or nurse care manager (NCM) during first 7 days of placement.
 - Visit Requirements for placements lasting 15-21 Days - At least two visits by SW, FSW or NCM during first 14 days of placement.
 - Visit requirements for placements lasting 22-28 days– At least three visits by SW, FSW or NCM during first 21 days of placement.
 - Visit requirements for placements lasting 29+ days - At least four visits by SW, FSW or NCM during first 28 days of placement out of which at least two visits should be by SW and out of these two SW Visits, one should be at the child's placement provider's home.
 - The following placements are excluded: placements lasting less than 8 days, placements when children are in runaway status, placements more than 100 miles from the District, and hospital placements.
- b) Outreach to Resource Parents: CFSA completed a case record review of a statistically significant sample of applicable cases in May 2021 to determine if Agency staff had a

conversation with the resource parent to assess their needs in caring for the child placed in their home. CFSA reviewed a total of 52 placements and replacements, a statistically significant sample with a 95 percent confidence interval and +/- 5 percent margin of error. The trained reviewers utilized a structured Survey Monkey instrument and focused on the following activities: (i) whether staff held a conversation with the resource parent; (ii) what immediate concerns resource parents identified; (iii) how the agency or private agency partner addressed the identified needs during the first 4 weeks of placement (if applicable); and (iv), if the outreach was not made during the first 4 weeks, what barriers to outreach did staff document.

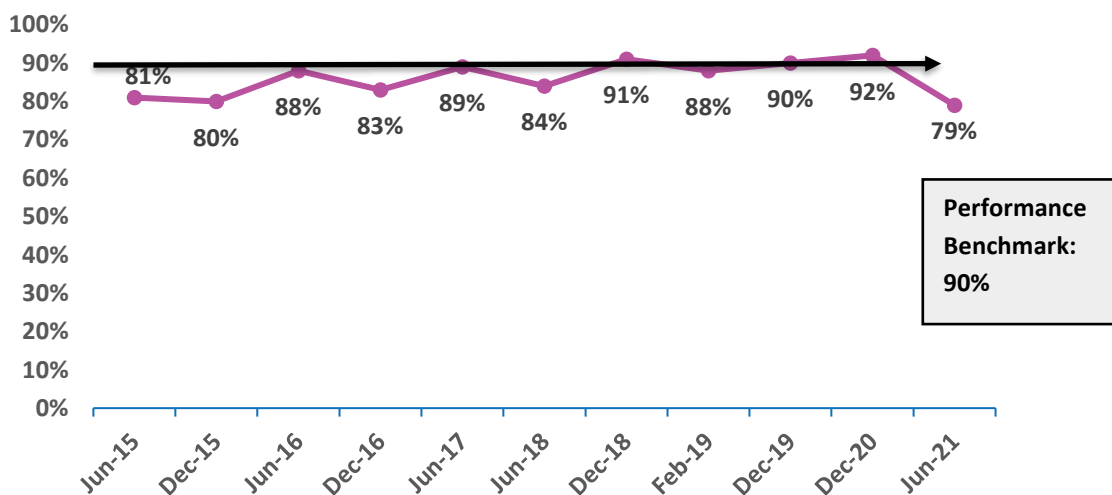
2021 Performance

- a) Visits: A monthly range of 79 to 91 percent of applicable children had the required number of visits following a new placement or placement change.⁵¹
- b) Outreach to Resource Parents: For children newly placed in foster care or experiencing a placement change during May 2021, 63 percent of children had documentation indicating that a social worker, supervisory social worker, or foster parent support worker had a conversation with the resource parent to assess assistance needed from the Agency for the child.

Historic Information

- a) Visits: Visits between social workers and children in their foster placements help social workers ensure that children have their needs met while they are in Out-of-Home care. Performance on social worker visits to children newly placed has generally increased overtime. Figure 15 below shows performance since June 2015.

Figure 15. Required Number of Worker Visits to Children in New Placements, June 2015 – December 2020

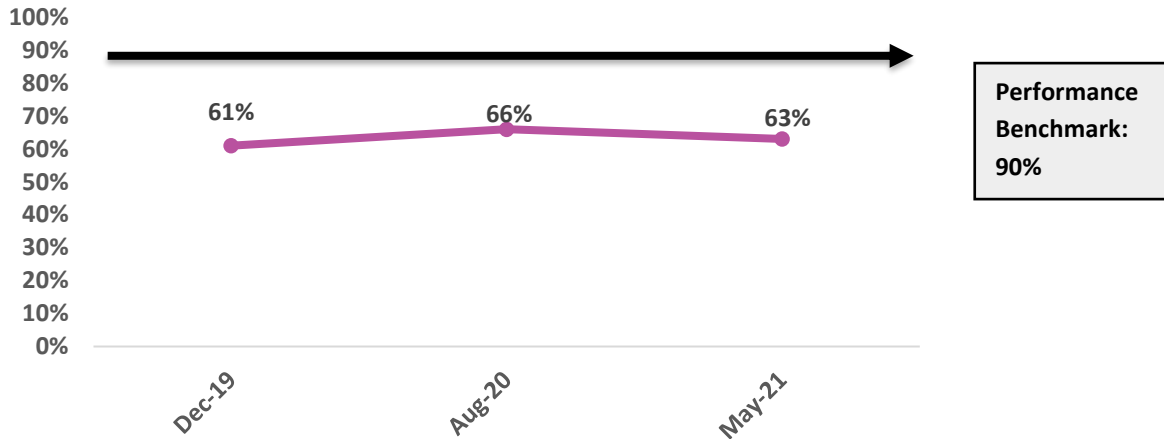


- b) Outreach to Resource Parents: The Agency has historically struggled to meet this performance measure. In August 2020, 66% of children had documentation indicating that staff had a

⁵¹ January 2021: 91%, February 2021: 85%, March 2021: 91%, April 2021: 90%, May 2021: 88% and June 2021: 79%.

conversation with the resource parent to assess their needs in caring for the child, which was a slight increase from the 61% noted in December 2019. Performance on the measure for the last three reporting periods are shown in (Figure 16).

Figure 16. Outreach to Resources Parents during First Four Weeks, February 2020 – May 2021

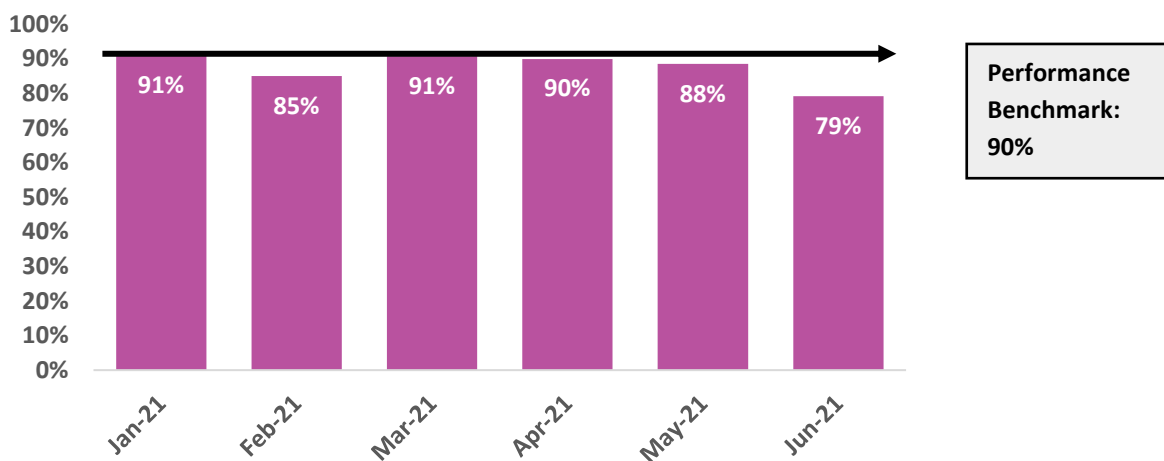


Source: Reviews conducted by CFSA staff of all eligible placements during selected months

Analysis

- a) Visits: CFSA met the requirement for this measure during 3 out of 6 months of the monitoring period (see Figure 17). Performance ranged from 79 to 91 percent. Performance on this measure was missed by 2-5 percent in February and May 2021. Performance was lowest in June 2021, when performance fell 11 percent below the benchmark at 79 percent.

Figure 17. Required Number of Worker Visits to Children in New Placements, January – June 2021



Source: FACES.NET report CMT014

PAQIA analysts examined the reasons for non-compliance during the 3 months the benchmark was missed. The following themes emerged:

- (i) **FACES Entry Error:** an error with documentation that led to completed visits not being counted, visits were not documented in a timely fashion, visits were completed shortly after the four weeks elapsed, or other elements of the benchmark methodology were not met. This theme impacted 48 percent (n=16) of the 33 non-compliant cases;
- (ii) **Respite Placements:** youth returned to their original placement after staying in a respite placement, but an error with how the placement was documented led to youth not being excluded from the first four weekly population, or youth who was placed in respite care multiple times before returning to original placement. This theme impacted 30 percent (n=10) of the non-compliant cases;
- (iii) **Reporting Issue:** the report logic needs to be re-examined due to the population including youth who did not have a placement change and therefore did not need first four weekly visits (i.e., youth who ran away for a short period of time before returning to the original placement). This theme impacted 6 percent (n=2) of the non-compliant cases;
- (iv) **Older Teenagers:** youth in new placements were older teenagers who spend most of their time in the community and were not available for a visit despite agreeing to the scheduled time. This theme impacted 6 percent (n=2) of the non-compliant cases; and
- (v) **Exception Scenarios:** Scenarios where unique situations occurred that did not fall into a specific theme, i.e., children placed in residential facilities only allow one visit per month; and scheduling difficulties with a youth or resource parent, which impacted 9 percent (n=3) of the non-compliant cases.

Table 10. Themes among Children Non-Compliant for First Four Weekly Visits

Month/ Year	FACES Entry Error	Respite Placements	Reporting Issue	Older Teenager	Exception Scenarios	Total Non- Compliant
Feb-21	7	1	1	1	1	11
May-21	3	2	1	1	1	8
Jun-21	6	7	0	0	1	14
Total	16	10	2	2	3	33

Source: Manual Review

- b) Staff completed outreach to the resource parent for 33 placements (63 percent) of the statistically significant sample of 52 eligible placements and replacements during May 2021. This performance is a decline from the prior monitoring period (66 percent). Overall performance continues to remain below the benchmark of 90 percent.

Although Agency staff noted that resource parent support workers, family support workers, and social workers are contacting resource parents within the first 24 hours of a placement or replacement to determine if there are any outstanding needs for the child, there is a lack of documentation of the conversation and whether any needs were identified. Permanency leadership will work with CFSA staff and private agency partners to improve documentation of outreach to resource parents and will monitor documentation of research parent outreach efforts on a monthly basis.

Conclusion

CFSA considers this measure not achieved.

14. Parent-Child Visits

Measure

80 percent of children with the goal of reunification will have weekly visitation with the parent with whom reunification is sought.⁵²

Methodology

To assess performance, reviewers used FACES.NET data to identify which cases had the required number of visits. CFSA also conducted an internal audit validated by the IVA to confirm completion of supervisory-approved necessary efforts for those cases in which visits did not occur.

During prior monitoring periods under *LaShawn*, the Agency was able to document unsuccessful attempts to facilitate parent-child visits in FACES as Missed Visit Efforts if “visitation was not in the child’s best interest, is clinically appropriate or did not occur despite efforts by the Agency to facilitate it.”⁵³ Visits that were not held because a parent refused to participate in a visit or did not show for a visit and there were efforts to reschedule were eligible for Missed Visit Efforts. Effective January 1, 2021, CFSA implemented changes to the reporting process for Missed Visit Efforts for parent-child visits per the new Four Pillars Framework. Under the new framework, acceptable Missed Visit Efforts are limited to the following circumstances:

- Social worker was unable to locate parent
- A stay away order exists between parent and child
- The parent resides outside the jurisdiction (>50 miles from DC)
- A court order states that visits are at the youth’s discretion

2021 Performance

The agency used 2 months of data during the performance period and determined compliance of 69 percent in January 2021, and 59 percent in May 2021.

⁵² In cases in which visitation does not occur, the Agency shall demonstrate and there shall be documentation in the case record that visitation was not in the child’s best interest, is clinically inappropriate, or did not occur despite efforts by the Agency to facilitate it.

⁵³ MFO, p. 24; IEP, p. 10.

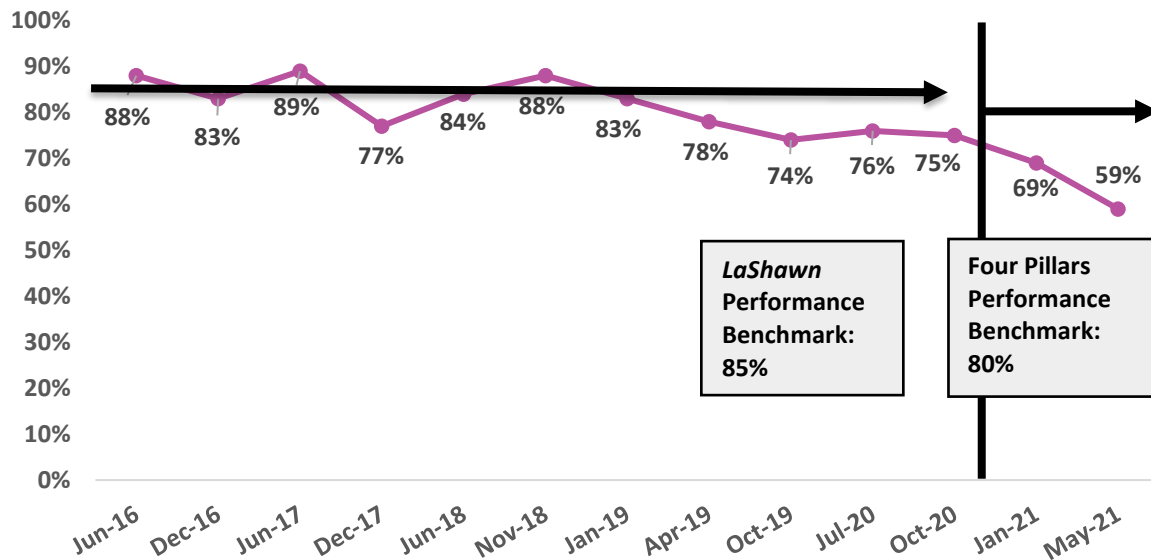
Historic Information

CFSA has historically experienced challenges in meeting this standard. Performance on this measure was assessed as 76 percent in July 2020 and 75 percent in October 2020, below the required level of performance (85 percent)⁵⁴. During the 2020 monitoring period, the COVID-19 pandemic impacted CFSA's ability to conduct in-person visitation between parents and children, requiring visits to occur over virtual platforms.⁵⁵ In some cases, this practice shift created barriers for parents who did not have access to Zoom, FaceTime, or other virtual platforms. CFSA attempted to overcome these barriers by providing support to parents who were not familiar with virtual communication platforms and attempts to facilitate safe outside visits when possible.

Based on the changes to the measure implemented in January 2021, comparison of past and current performance should not be made due to the change in methodology.

Figure 18 shows CFSA's performance from June 2016.

Figure 18. Children with Goal of Reunification who Visit Weekly with the Parent with whom Reunification is Sought, June 2016 – May 2021



Analysis

CFSA assessed performance on this measure at 69 percent in January 2021, and 59 percent in May 2021, both percentages fall below the 80 percent performance benchmark. Sixty-four percent of youth in January 2021 received the required number of visits with their parents. An additional 5 percent of youth (16 cases⁵⁶) met compliance because the case met one of the approved missed

⁵⁴ The benchmark was changed from 85 percent to 80 percent with the implementation of the Four Pillars Performance Framework and removal of parents who did not show up for scheduled visits as an acceptable reason for submission of missed visit efforts.

⁵⁵ The last monitoring period for the *LaShawn v. Bowser* lawsuit covered performance in January 2020-December 2020.

⁵⁶ The applicable missed visit efforts categories for January 2021 were: Caregiver could not be located (n=8), court order left visits at the discretion of a youth (n=7), and caregiver lives more than 50 miles from DC (n=1).

visit efforts categories and CFSA validated the social worker's efforts to address the barrier to visitation. In an additional 58 cases, while there was not an approved missed visit effort category relevant to the case, the social worker submitted documentation regarding the barriers to visitation, which are shown in Figure 19 below.

Fifty-five percent of youth in May 2021 received the required number of visits with their parents. An additional 4 percent (11 cases⁵⁷) met compliance because the case met one of the approved missed visit efforts categories and CFSA validated the social worker's efforts to address the barrier to visitation.⁵⁸ In an additional 55 cases, while there was not an approved missed visit effort category relevant to the case, the social worker submitted documentation regarding the barriers to visitation, which are shown in Figure 19 below.

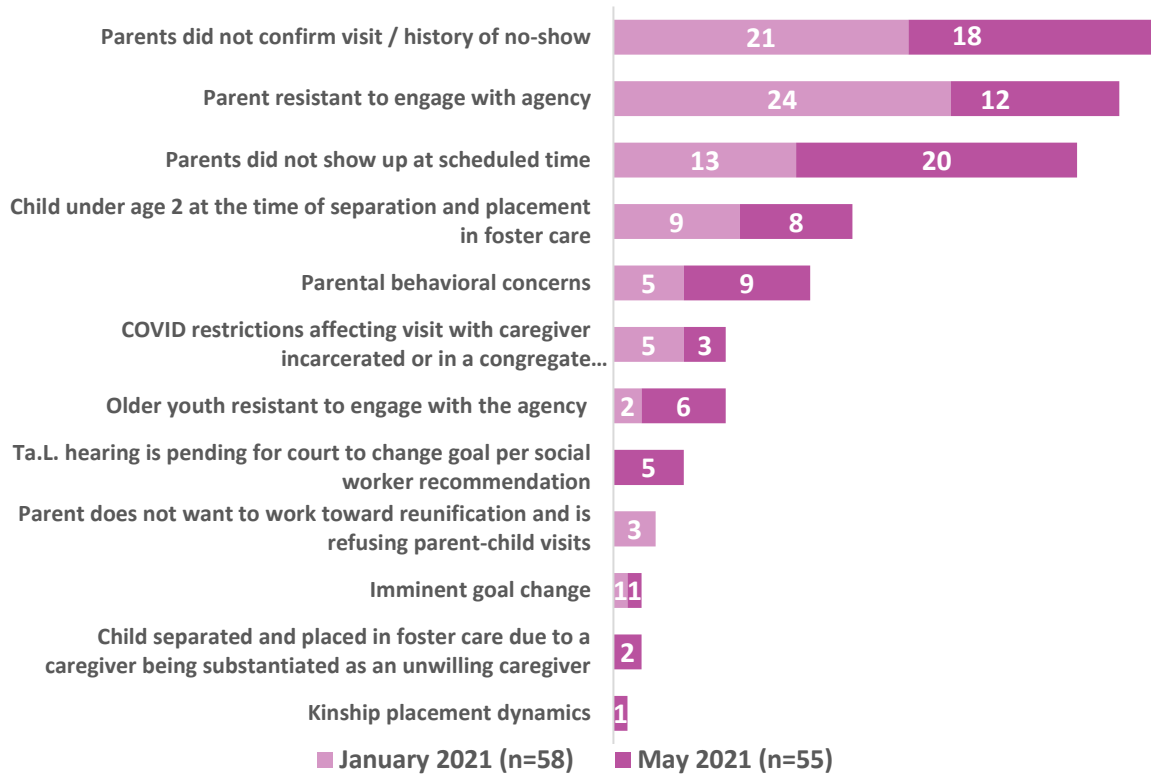
Table 11. Parent-Child Visit Performance Breakdown, January and May 2021

Audit Outcome	January 2021	May 2021
Children received the required number of visits with their parents	200 (64%)	157 (55%)
CFSA validated that an approved missed visit effort category was met and sufficient efforts made by the social worker	16 (5%)	11 (4%)
Total compliant for parent-child visits	216 (69%)	168 (59%)
Total Children Applicable for Measure	314 (100%)	283 (100%)

Barriers and challenges to completing the required number of monthly visits were identified for the cases that did not have completed visits and did not meet an exception. The top three challenges to completing visits for both months reviewed were parent resistance to engage with the agency, parents not confirming the standing weekly visit time and having a history of no-shows, and parents not showing up at the agreed-upon visit time for that week. An overview of these barriers and challenges are included in Figure 19. Some of these barriers reflect current challenges towards regular visitation, and some reflect conditions that existed prior to the child's separation and placement in foster care, such as the child entering care due to the parent being substantiated as an unwilling caretaker or infants entering the system prior to the parent establishing a strong attachment.

⁵⁷ The applicable missed visit efforts categories for May 2021 were: Caregiver could not be located (n=9) and court order left visits at the discretion of a youth (n=2).

Figure 19. Barriers and Challenges to Completing Required Parent-Child Visits for Cases Without Completed Visits and Not Meeting Exceptions, January and May 2021 Audits⁵⁹



Conclusion

CFSA considers this measure not achieved.

15. Parent-Worker Visits

Measure

80 percent of parents will have twice monthly visitation with workers in the first nine months post-placement.⁶⁰

Methodology

To assess performance, reviewers used FACES.NET data to identify cases that had the required number of visits. CFSA conducted an internal audit, validated by the IVA, to confirm completion of supervisory-approved necessary efforts for those cases in which visits did not occur. During prior monitoring periods under *LaShawn*, the Agency was able to document unsuccessful

⁵⁹ Audited cases may have more than one barrier or challenge identified.

⁶⁰ For children with a permanency goal of reunification, in accordance with the case plan, the CFSA or private agency social worker with case management responsibility shall visit with the parent(s) at least one time per month in the first 9 months post-placement. A CFSA social worker, nurse care manager or family support worker shall make a second visit during each month for the first 9 months post-placement. If a child is in care for 8-14 days, one visit with each caretaker listed in the household is required per month; caretakers listed in the households of children in care for 15+ days require two visits per month.

attempts to facilitate parent-worker visits in FACES as Missed Visit Efforts if a parent refused to participate in a visit or did not show for a visit and there were efforts to reschedule. In January 2021, CFSA implemented changes to the reporting process for Missed Visit Efforts for parent-worker visits, which are included in the new Four Pillars Performance Framework. Under the new framework, acceptable Missed Visit Efforts are limited to the following circumstances:

- The social worker is unable to locate the parent
- The parent resides outside the jurisdiction (>50 miles from DC)

The timeframe for monitoring visit compliance has also shifted from compliance over the 3-month period post-placement to compliance by month over the 9-month period post-placement.

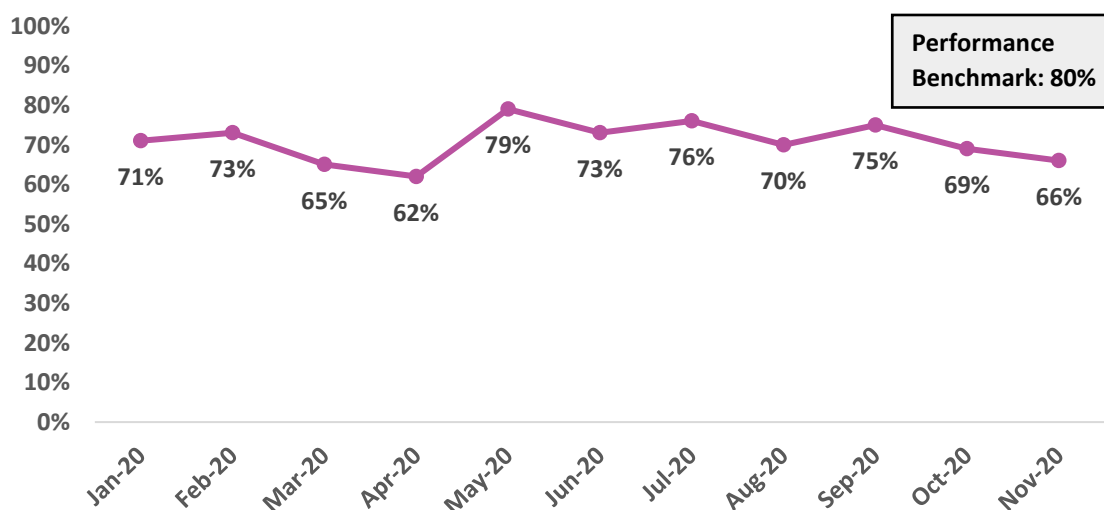
2021 Performance

Between January 2021 and June 2021, social workers completed required visits for a monthly range of 64 to 77 percent of parents with children in foster care with a goal of reunification in the first nine months the children were in care.

Historic Information

Performance on worker-parent visits ranged monthly from 62 to 79 percent between January 2020 and June 2020, and from 66 to 76 percent between July 2020 and November 2020. This data reflects the formerly used methodology, and therefore direct comparisons to performance in 2021 cannot be made. Figure 20 below shows CFSA's performance from January 2020-December 2020.

Figure 20. Households with Twice Monthly Visits between Workers and Parents with Goal of Reunification, January 2020 – November 2020⁶¹



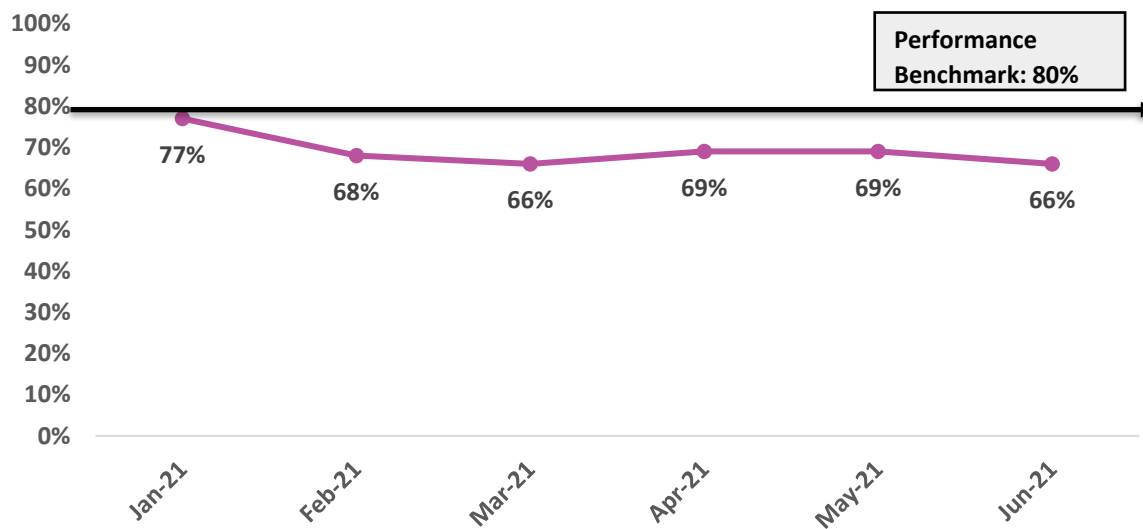
Source: CFSA Administrative Data, FACES.NET report CMT267 and findings from CFSA internal audit with Monitor validation of missed visits efforts during select months

⁶¹ Parent-Worker visits for December 2020 were not audited due to the pending compliance shift effective January 2021.

Analysis

Performance for the January to June 2021 reviews peaked in January 2021, at a rate of 77 percent. Performance on this measure was lowest in March and June 2021 (66 percent) during the January-to-June timeframe. While CFSA has still not met this benchmark, performance has remained stable over the last five months of the performance period (within 3 percentage points). See Figure 21 below.

Figure 21. Households with Twice Monthly Visits between Workers and Parents with Goal of Reunification, January – June 2021



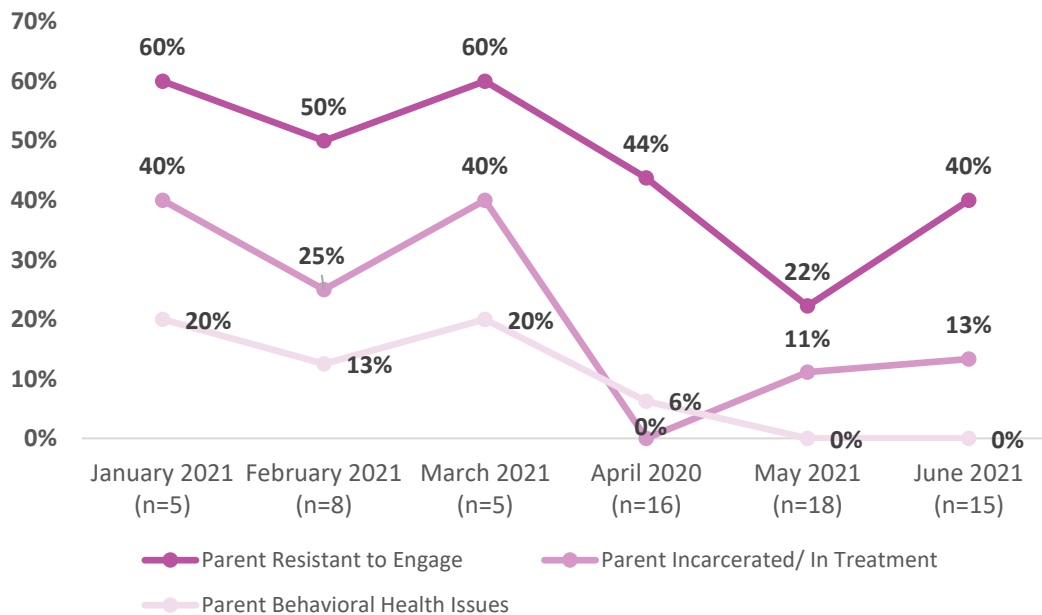
During January-June 2021, as detailed in Table 12 below, a range of 61 percent to 67 percent of the applicable households had the required visits between the parents and social workers. An additional range of 2 to 11 percent met compliance because the case met one of the approved missed visit efforts categories and CFSA validated the social worker's efforts to address the barrier to visitation⁶². In 67 cases, while there was not an approved missed visit effort category relevant to the case, the social worker submitted documentation regarding the barriers to visitation and these are described further in Figure 22.

⁶² Across the six months, the social worker was unable to locate the parent in 23 cases and the parent resided 50+ miles outside of DC in an additional 5 cases.

Table 12. Parent-Worker Visit Performance Breakdown, January-June 2021

Month	Total Households Applicable for Measure	Households Received Required Visits	Household Met an Approved Circumstance; CFSA Validated Efforts	Total Compliant for Parent-Worker Visits
January 2021	47 (100%)	31 (66%)	5 (11%)	36 (77%)
February 2021	62 (100%)	40 (65%)	2 (3%)	42 (68%)
March 2021	76 (100%)	48 (63%)	2 (3%)	50 (65%)
April 2021	84 (100%)	56 (67%)	2 (2%)	58 (69%)
May 2021	91 (100%)	56 (62%)	4 (4%)	60 (66%)
June 2021	107 (100%)	65 (61%)	7 (7%)	72 (67%)

Barriers and challenges to completing the required number of monthly visits were identified for the cases that were not eligible for Missed Visit Efforts under the new measurement framework. The most prevalent barrier to Missed Visit Efforts was parent refusal to engage with the Agency. An overview of barriers and challenges are included in Figure 22 and Table 13.

Figure 22. Barriers to Completing Parent-Worker Visits, January – June 2021⁶³

⁶³ More than one barrier can be applicable per case.

Table 13. Barriers to Completing Parent-Worker Visits, January to June 2021

Barrier	Jan (n=5)	Feb (n=8)	Mar (n=5)	Apr (n=16)	May (n=18)	Jun (n=15)	Total
Parent Resistant to Engage	3	4	3	7	4	6	27
Parent Incarcerated/ In Treatment	2	2	2	0	2	2	10
Parent Behavioral Health Issues	1	1	1	1	0	0	4

The COVID-19 pandemic impacted social workers' ability to meet safely with parents in person. Pandemic guidelines required social workers to visit with parents outdoors or to utilize virtual means of communications (e.g., phone calls, FaceTime, and Zoom). In some cases, these virtual forms of communication made it easier to facilitate visits. In other instances, virtual communication was not accessible for parents experiencing homelessness, parents without regular access to a cellular device, or parents who were incarcerated. Although performance for this measure has improved over time, the 2021 barriers impacted current performance which remains an area in need of Agency practice improvement. CFSA will use the following strategies to improve engagement and support for birth parents, to include:

- Continued and focused use of PEER Advocates for individual case support
- Continued and focused use of Recovery Specialists, Project Connect, and Family Treatment Court for parents impacted by substance use
- Increased referrals and engagement with MBI to provide therapy for parents impacted by mental health
- Targeted training for staff on adolescent development and working with unable/unwilling caregivers

Conclusion

CFSA considers this measure not achieved.

16. Sibling Visits

Measure

80 percent of children shall have monthly visits with their separated siblings and 75 percent of children shall have twice monthly visits with their separated siblings.

Methodology

To assess performance, CFSA utilizes data from FACES.NET. Children placed apart from their siblings should have at least twice monthly visitation with some, or all, of their siblings unless documented that the visitation is not in the best interest of the children.

2021 Performance

A monthly range of 88 to 92⁶⁴ percent of applicable children had at least one monthly visit with their separated siblings. A monthly range of 76 to 86⁶⁵ percent of applicable children had twice monthly visits with their separated siblings.

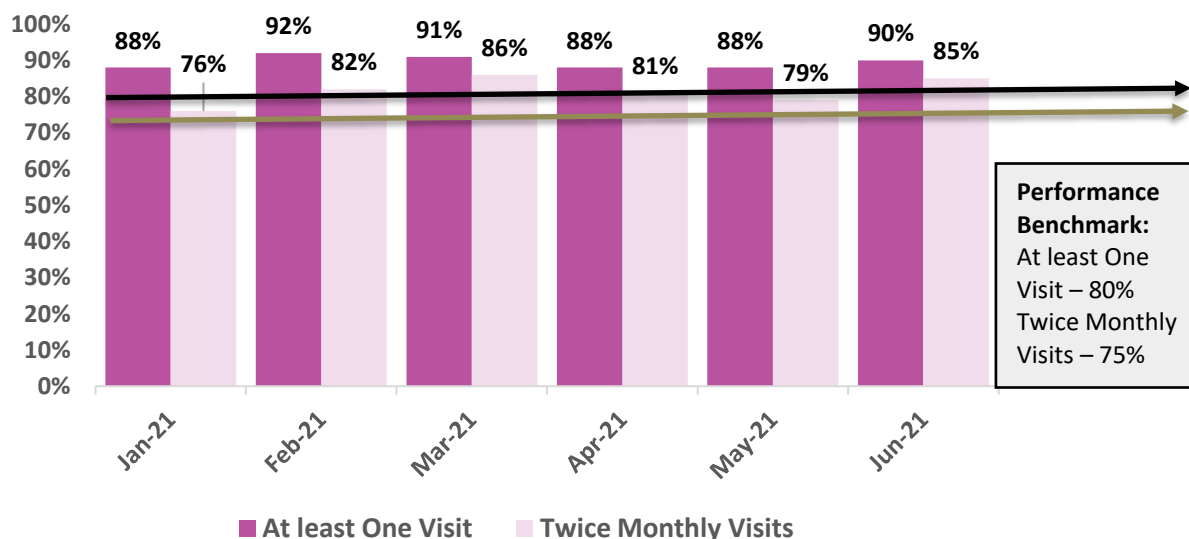
Historic Information

Performance on children visits with their separated siblings has been consistently met over time for both measures, i.e., at least one monthly visit for 80 percent of the children and twice monthly visits for 75 percent.

Analysis

CFSa met the requirement for both the measures for all 6 months of the monitoring period (see Figure 23). Successful achievement of this measure involves engagement of resource parents to set up video or in-person get togethers between separated siblings based on three considerations: (1) the assessment of safety or risk for the siblings' health during the pandemic, (2) the children's ability to see each other through parent-child visits for those with a goal of reunification, and (3) the established relationships between older youth siblings and their ability to see each other independent of the Agency.

Figure 23. Children with Required Number of Visits with their Separated Siblings, January – June 2021



Conclusion

CFSa considers this measure achieved.

17. Timely Approval of Foster/Adoptive Parents

⁶⁴ January 2021 = 138 (88 percent), February 2021 = 131 (92 percent), March 2021 = 122 (91 percent), April 2021 = 120 (88 percent), May 2021 = 124 (88 percent), June 2021 = 111 (90 percent).

⁶⁵ January 2021 = 119 (76 percent), February 2021 = 117 (82 percent), March 2021 = 115 (86 percent), April 2021 = 110 (81 percent), May 2021 = 112 (79 percent), June 2021 = 105 (85 percent).

Measure

70 percent of homes licensed between January and June 2021 will have been approved and interested parties will have been notified within 150 days.

Methodology

To assess performance, CFSA manual data is provided to the Independent Verification Agent on those homes that were licensed beyond 150 days from when the foster parent(s) began training. CFSA and its private partners – including NCCF, LAYC, LSS, and Children’s Choice – are responsible for supporting new foster parents in navigating the licensing process. When licensing a foster home that takes longer than 150 days due to circumstances outside the District’s control, the home is considered to be in compliance.

2021 Performance

79 percent (44 of 56) of foster homes licensed received their license within 150 days. Of the 44 homes considered compliant during the performance period, for 9 homes licensure took longer than 150 days due to circumstances that were beyond the District’s control such as medical delays, out of state clearances or federal/FBI clearances.

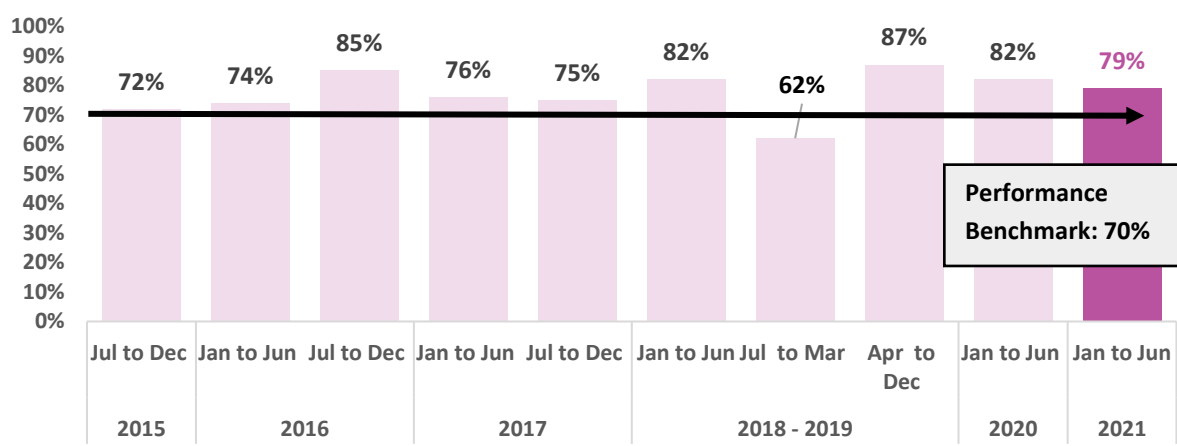
Historic Information

CFSA has consistently maintained performance on this standard from July 2015 to June 2018, and again from April 2019 to June 2021. From July 2018 to March 2019, performance dipped slightly below the 70 percent benchmark to 62 percent.

Analysis

CFSA and its partner agencies, LAYC and LSS, are responsible for licensing and monitoring foster homes in the District of Columbia, and NCCF is responsible for licensing homes in Maryland. This measure requires that 70 percent of homes be licensed within 150 days of the foster parent beginning training. Figure 24 below shows performance on this measure since July 2015.

Figure 24. Timely Approval of Foster/Adoptive Parents, July 2015 to June 2021



Source: CFSA’s Administrative Data, FACES.NET report PRD202

In 2019 CFSA implemented several strategies to improve performance, including the creation of a centralized tracking form to monitor the licensing status of new foster parents, monthly meetings

between CFSA and its partner agencies to discuss performance and barriers to timely licensing, and increasing expectations for licensing workers to follow-up timely with prospective foster parents on outstanding documents. In 2020, CFSA started discussing performance for this measure at the monthly internal “Finish Line” meetings where administrators share barriers that lie at the intersection of multiple administrations to address systemic barriers that may impede performance. As of June 30, 2021, each of these strategies are still in place and have contributed to sustained performance above the 70 percent benchmark.

Conclusion

CFSA considers this measure achieved.

18. Placement array amongst kinship and family foster homes

Measure

85 percent of all placements shall be in a foster home.

Methodology

To assess performance, CFSA analyzes FACES.NET placement data to determine the distribution of children among CFSA’s most family-like settings, i.e., kinship and traditional foster homes.

2021 Performance

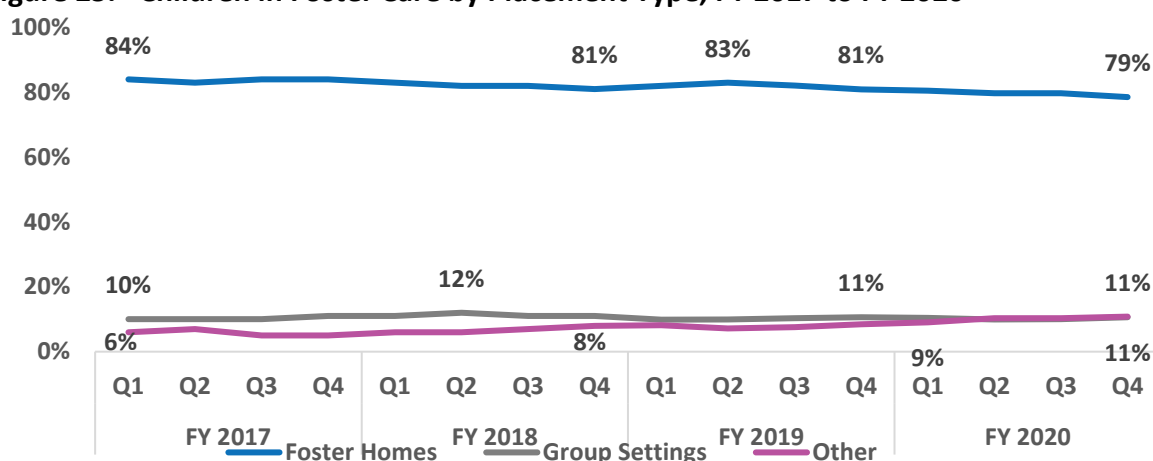
CFSA placed a range of 77 percent to 79 percent of children in kinship and family foster homes each month.⁶⁶

Historic Information

While CFSA has a history of nearly meeting this target on an annual basis (between FY 2017 through FY 2019, CFSA performed within 1 to 4 percent of meeting this measure), including achievement of the target in the past (FY 2015 Q4- FY 2016 Q1), the percentage of children placed in family-based setting has been on a slight decline since the beginning of FY 2020. See Figure 25 below.

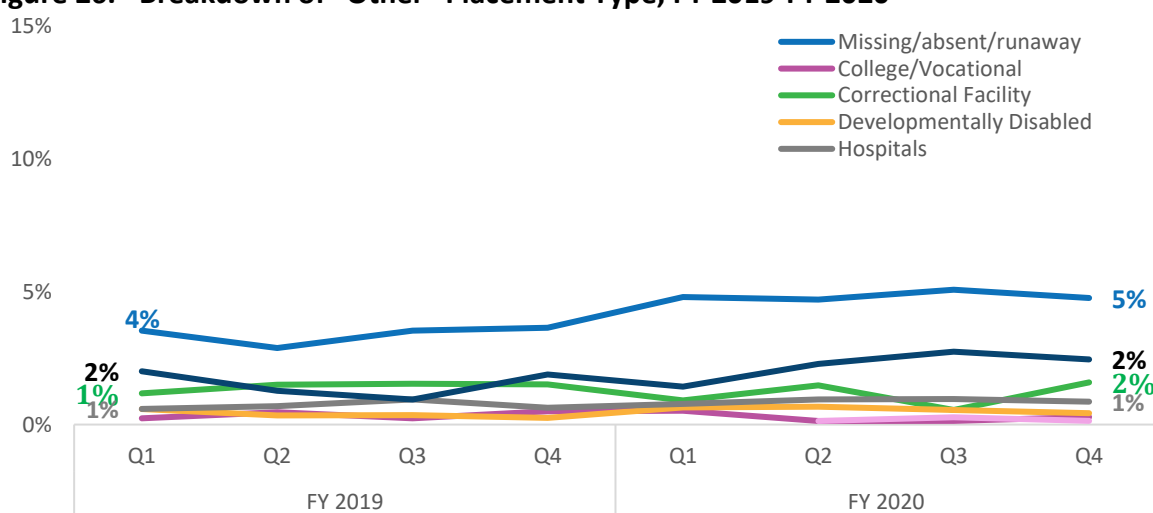
⁶⁶ January 2021: 78 percent, February 2021: 79 percent, March 2021: 78 percent, April 2021: 77 percent, May 2021: 77 percent, June 2021: 78 percent. Reported data are point-in-time on the last day of the month.

Figure 25. Children in Foster Care by Placement Type, FY 2017 to FY 2020⁶⁷



CFSA’s primary goal is to place children in family-based settings. However, if a child has clinical needs that are not successfully managed in a family-based setting and one or more family-based placements disrupt, alternative placement types such as a congregate setting may be explored. Between FY 2017 to FY 2020, CFSA placed between 10 to 11 percent of its foster care population in group settings such as group homes, independent living programs, and residential treatment. The remaining 7 to 11 percent of the foster care population was in the “other” placement category, which includes children classified as missing, absent, or abducted (range of 3 to 5 percent), college (fewer than 1 percent, since many youth who are attending college retain their foster care placement in a family-based setting), correctional facilities (range of 1 to 2 percent), hospitals (consistently 1 percent), and unlicensed placements (range of 1 to 3 percent). See Figure 26 for the breakdown of “Other” Placement Type in FY 2019 and FY 2020.

Figure 26. Breakdown of “Other” Placement Type, FY 2019-FY 2020



⁶⁷ “Other” placement type includes children in missing, absent or runaway status, correctional facilities, college/vocational, developmentally disabled, hospitals, juvenile foster care (non-paid), and not in licensed placement.

When children reside in unlicensed placements, CFSA's goal is working with the caregivers to become licensed placements for children.⁶⁸ CFSA continues to make congregate care placements its last placement option for children.

The stable, low usage of congregate care settings has been possible because of initiatives that focus on family first. The *Kin-First* initiative, for example, emphasized identifying, engaging and supporting families to take care of their kin at the CPS separation of a child from their birth parents. CFSA holds a Family Team Meeting within 72 hours of the separation to engage and support the family with reunification and placement of the child with kin, whenever possible. In recent years, CFSA has also emphasized early identification of kin by creating a "concurrent kin plan" for all open In-Home cases and during new CPS investigations. The concurrent kin plan involves asking the parents who they would like to care for their children if they were not able to and confirm with the kin family member that they are willing and able to fulfill the assumed caretaking responsibilities.

Further, the Kinship Unit attends the multi-disciplinary team meetings held on In-Home cases where there are concerns of a possible separation, to initiate further exploration of the identified kin prior to the child's entry into foster care. CFSA through the Child Welfare Training Academy offers training for resource parents and encourages participation with the DC Metropolitan Foster and Adoptive Parents Association (DCMFAPA) and the Foster and Adoptive Parent Advocacy Center (FAPAC). Training, DCMFAPA, and FAPAC services increase the possibility for placement stability and permanency for every child. CFSA has a support unit for kinship resource parents as they go through licensure. The Kinship Unit guides resource parents throughout the licensing process to resolve their anxieties and overcome any barriers. The Agency allows children to reside with their kin as potential resource parents through emergency licensing, while they complete the procedures to obtain a full license in D.C. or Maryland. Finally, the Agency provides virtual resources for kinship resource parents to gain access to various organizations and services that can offer counsel and help as needed.

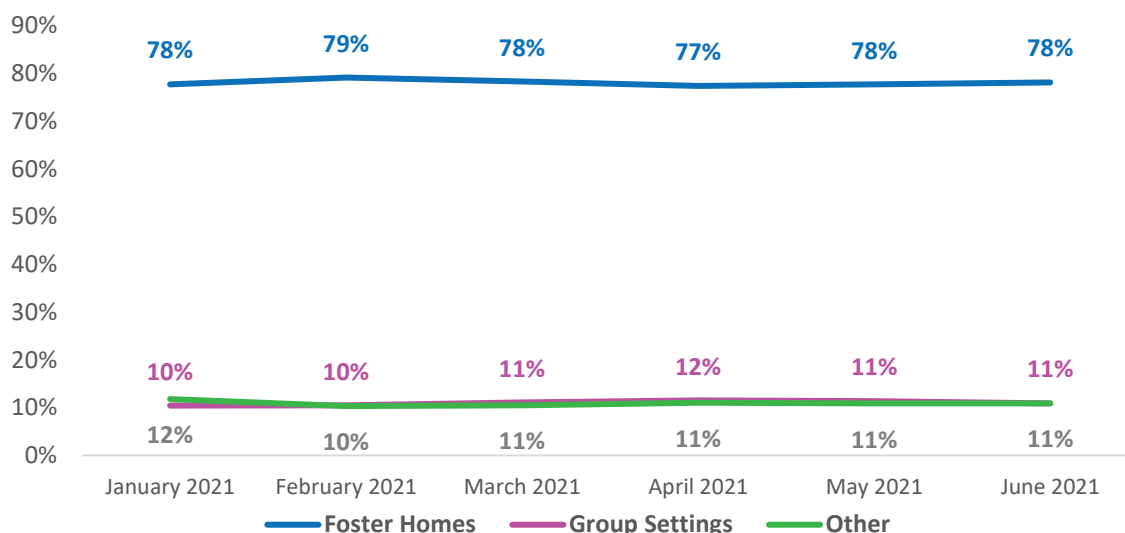
Analysis

CFSA had 486 children (78 percent) placed in kinship, pre-adoptive, and traditional foster homes out of the 623 children in foster care as of June 30, 2021. Between 77 to 79 percent of the children in foster care were placed in a family-based setting during the January-June 2021 performance period. Of the 486 children placed in a family-based setting, 323 (66 percent of children placed in a family-based setting) of the children resided in traditional foster homes. 149 of the children (31 percent) resided in kinship homes. Additional placement types for the remaining 14 children (3 percent) included pre-adoptive homes and out-of-town placements through Interstate Compact, i.e., a child has been placed with a kinship resource parent or pre-adoptive parent in another state. CFSA continues to place the majority of its children needing Out-of-Home placement in family-like

⁶⁸ CFSA makes all efforts to place children in licensed placements, however there are a few situations in which children may be in unlicensed placements, including the Family Court may order that a child be placed with someone who is not currently licensed, or a child may refuse their identified licensed placement and elect to stay with a family member or friend instead.

settings based on experience and research showing that family-based homes increase opportunities for children to achieve positive permanence.⁶⁹

Figure 27. Children in Foster Care by Placement Type, January-June 2021



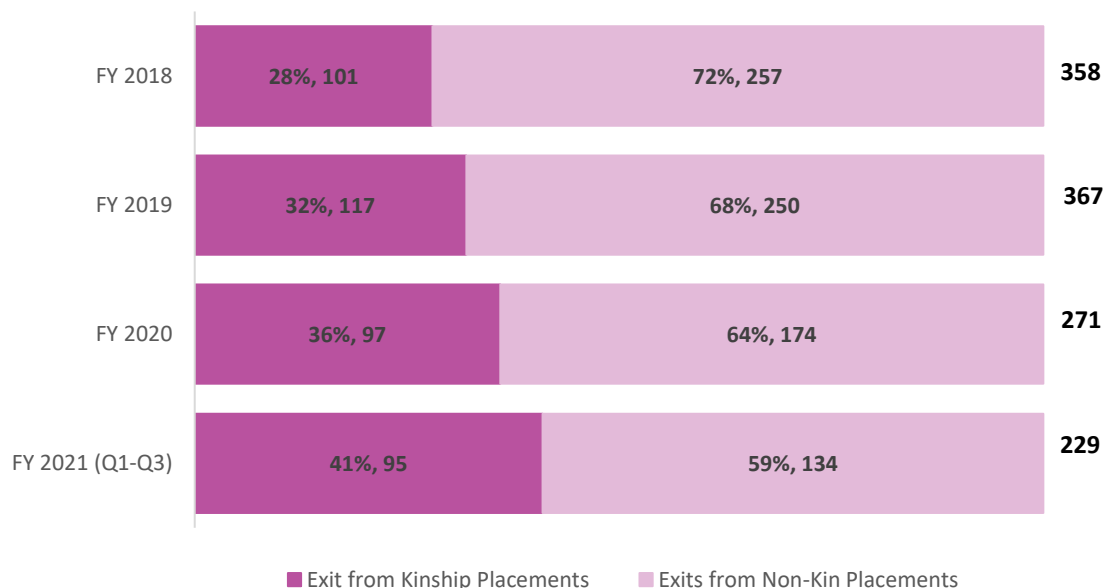
One barrier to achieving this measure includes the natural turnover of resource homes due to achieving permanency for children in foster care. As children in the most family-like settings achieve permanency, some of those homes naturally close for ongoing foster care services (i.e., kin elect to not continue to take placements after the relative in their care reunifies or they provide permanency, and non-kin resource parents may elect to take a break or stop fostering after they adopt or become guardians of children in their home). While data was not tracked in this manner prior to FY 2020, the Net Gain-Loss report for FY 2020 and FY 2021 shows that 27 non-kin foster homes were closed in FY 2020 after the children achieved permanency and exited foster care, and 21 non-kin homes closed in FY 2021 after the children achieved positive permanency⁷⁰. In FY 2020, 58 kinship homes closed after the children placed there achieved positive permanency, and 55 kinship homes closed in FY 2021 after child achieved positive permanency. CFSA continues to recruit additional foster families through the REACH campaign.

CFSA continues to focus on the importance of placing children with kin, since kin placements are the most stable and permit children to maintain important connections to family and community. The number and proportion of children exiting to permanency from kinship placements has been growing since FY 2018. Since FY 2018, the proportion of children exiting to positive permanency from a kinship placement has been increasing each year, from 28 percent of exits to positive permanency in FY 2018 (101 out of 358 total exits to positive permanency) to 41 percent in FY 2021 Q1-Q3 (95 out of 229 total exits in FY 2021 Q1-Q3).

⁶⁹ <https://www.acf.hhs.gov/cb/policy-guidance/im-21-01>

⁷⁰ Positive permanency includes exits due to reunification, guardianship and adoption.

Figure 28. Proportion of Exits to Positive Permanency from Kinship vs. Non-Kinship Resource Homes

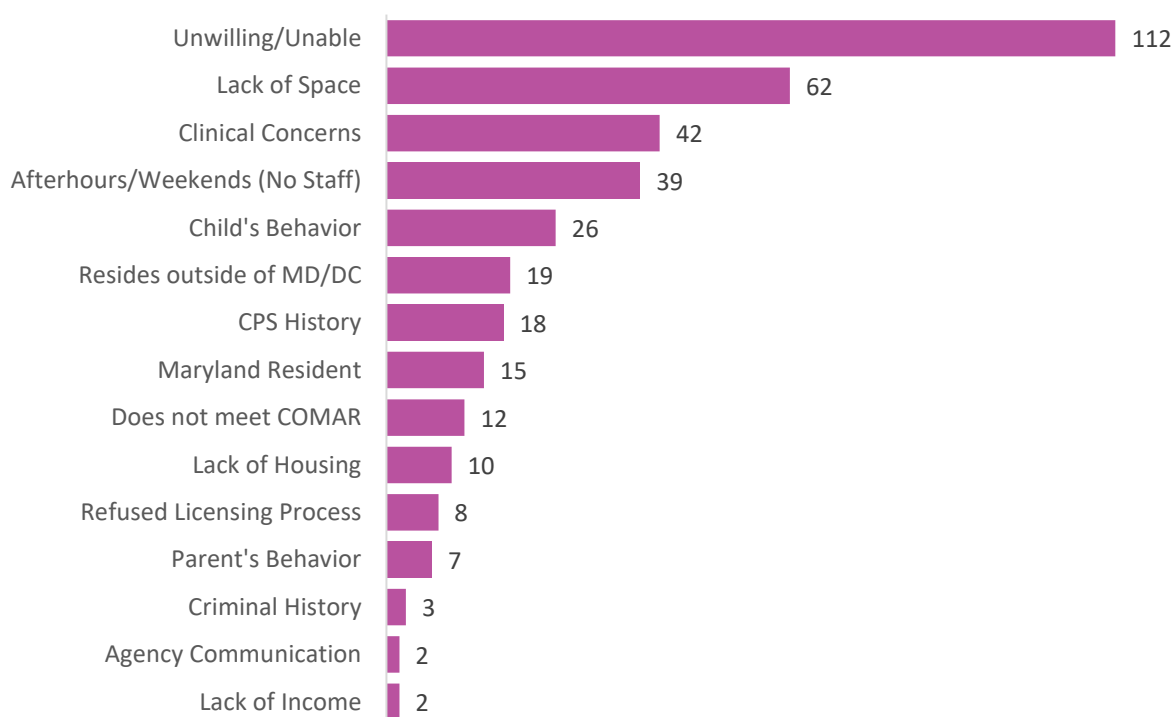


Once kinship homes have closed, new kinship homes have not opened at the same rate, which has led to the number of children placed in kinship care declining from a high of 31 percent in FY 2020 Q2 to 24 percent of children placed in kinship placements at the end of FY 2021 Q3. In FY 2021 through Q3, a total of 59 new kinship homes (capacity of 65 beds) were opened, while 70 kinship homes (capacity of 98 beds) were closed during the same timeframe, which led to a net loss of 11 homes (capacity of 33 beds).

CFSA is closely tracking efforts to placing children with kin immediately upon entry into foster care or shortly thereafter with a weekly placement analysis, which began on December 30, 2019. During FY 2021 Q1-Q3, a total of 192 kids entered care. Of these children, 25 (13%) children had an initial placement with kin and 7 (4%) children had a second placement with kin. For all children, the barriers to placement with kin were tracked and documented. When multiple kin were explored, barriers may have been experienced by some kin but not by others, and multiple barriers could be experienced by one or different kin for the same child. Figure 29 shows the barriers found to placing children with kin during FY 2021 Q1-Q3. Overwhelmingly, the most frequent barrier (n=112) is that the explored kin reported being unwilling/unable to become a resource parent for the youth who was separated from their caregivers and entered foster care.⁷¹

⁷¹ When kin report being unable/unwilling to become licensed, a variety of supports are offered to include: furniture, rental assistance, payment for items needed for licensure such as exterminators or carpet cleaning, etc. Many kin in this category have unsuccessfully provided informal care to the child in the past, are elderly or ill, or are unwilling to care for the child due to a poor relationship with the parents. CFSA also works with the identified kin to brainstorm solutions to these concerns.

Figure 29. Barriers to Kinship Placement for New Entries/Re-Entries, FY 2021 Q1-Q3



Regarding the needs of children in foster care overall, while family-based care is generally the most appropriate setting for youth, there are specialized circumstances in which child(ren)’s therapeutic needs are best served in a non-family-based setting. At times, for example, due to the child’s trauma history, the intimacy involved with being placed in a family-setting may be too challenging for the youth. Youth may also have specialized medical or developmental needs that are better suited in an alternative placement. CFSA must then explore alternative options such as group settings and other placements (hospitals, psychiatric residential centers, placements for children diagnosed with developmental disabilities, etc.). While children reside in these settings, CFSA continues to make efforts to address the needs of each child to ensure these placements are as temporary as possible. Throughout a child’s placement in these structured settings, children are continually monitored and assessed for step-down supports to a less restrictive setting, i.e., back into a family-based setting. CFSA’s use of congregate settings (consistently 10 to 11 percent of the overall foster care population between FY 2019 to present) is similar to the national rate (as of the most recent AFCARS report, 10 percent of youth in foster care nationally were placed in group settings) and did not experience an increase when the percentage of children placed in family-based settings decreased.⁷²

The final category of placements for children in CFSA’s foster care population is “Other”, which includes children who are missing, absent or runaway, children in a college/vocational placement,

⁷² <https://www.acf.hhs.gov/sites/default/files/documents/cb/afcarsreport27.pdf>

correctional facilities, developmentally disabled, hospitals, juvenile foster care (non-paid), and children not in a licensed placement. Until the 1st quarter of FY 2020, fewer than 10 percent of the foster care population was placed into a placement type in the other category. Since this time, however, 10 to 11 percent of children have been placed in these settings. The two largest subtypes within this placement category are children in runaway status (between 4-5 percent of all children placed in foster care during January-June), and children in an unlicensed placement (between 3 to 4 percent of all children placed in foster care during this time frame). In both instances, CFSA is working to get the children placed back into a licensed placement.

Conclusion

CFSA considers this measure **not achieved**.

19. Placement Stability

Measure

Performance measure for reduction of multiple placements for children in care:

- a. Of all children served in foster care during the previous 12 months who were in care at least 8 days and less than 12 months, 83 percent shall have had two or fewer placements.
- b. Of all children served in foster case during the previous 12 months who were in care for at least 12 months but less than 24 months, 60 percent shall have had two or fewer placements.
- c. Of all children served in foster care during the previous 12 months who were in care for at least 24 months, 75 percent shall have two or fewer placements in that 12-month period.

Methodology

To assess performance, analysts used data from FACES.NET. The measurement logic excludes the following types of settings as a placement change: respite (if the child returns to their previous provider), hospital stays, children in runaway status, and college.

2021 Performance

- a. The first cohort of children had a monthly range of 80 to 83 percent for two or fewer placements.
- b. The second cohort of children had a monthly range of 60 to 63 percent for two or fewer placements.
- c. The third cohort of children had a monthly range of 81 to 82 percent for two or fewer placements.

Historic Information

The overall goal of this performance metric is to minimize placement moves for all children to the greatest extent possible. There are three sub-parts with different required performance levels based on the length of time children are in care, due to the different placement trajectories for children who have been in care for shorter versus longer periods of time. The third sub-part focuses

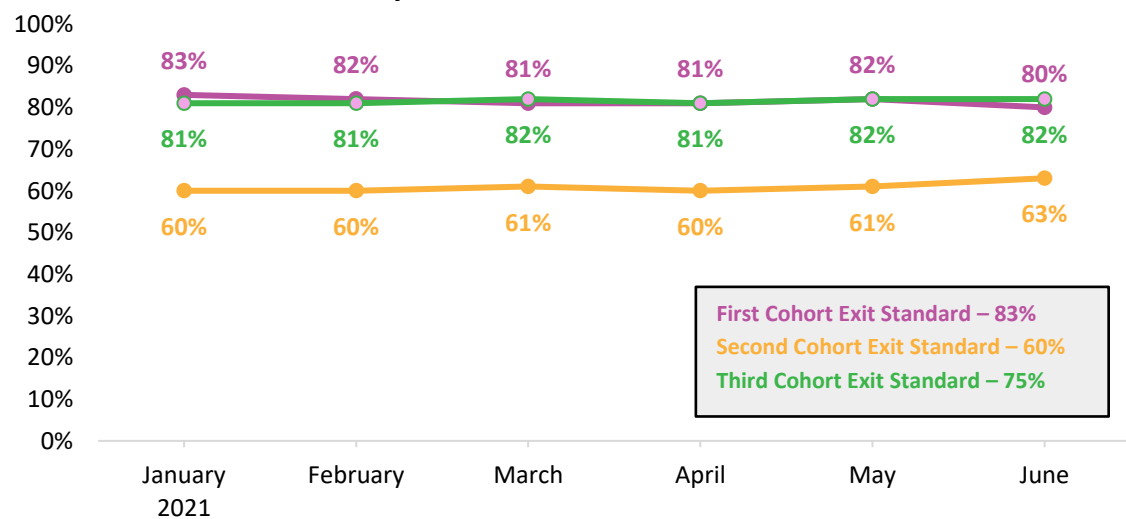
on children in care 24 months or longer and focuses on the child's placement experiences in the past 12 months. CFSA's Performance between January and December 2020 for each cohort are as follows; Cohort 1 monthly range of 76 to 81 percent, Cohort 2 monthly range was 60 to 65 percent, and Cohort 3 monthly range was 77 to 81 percent. The IVA assessed that this measure was partially met by meeting the target for Cohorts 2 and 3.

Analysis

For every month between February and June 2021, CFSA met the benchmark for Cohort 2 and Cohort 3 but remained slightly below (3 percentage points) the benchmark for Cohort 1 (children in care at least 8 days and less than 12 months). Placement stability for children in this first cohort, however, has improved. Specifically, CFSA met the benchmark of 83 percent in January 2021. Performance remained steady between 80 and 82 percent for the remaining months. The number of children entering care has steadily declined, which directly impacts the population size of Cohort

As the population of Cohort 1 decreases, so does the opportunity to stabilize future placements to meet the benchmark. CFSA's Placement Unit has been taking a closer look at all Cohort 1 children who experienced two or more placements to ensure that the Agency is using appropriate stabilization efforts to prevent a third move. Additionally, since June 2021, the Agency implemented stabilization meetings within 10 days of placement for all children entering, or re-entering care. The core purpose of these meetings is to identify the specific needs of the youth and their resource parents to ensure all supports are in place for placement stabilization at the time of the initial placement.

Figure 30. Placement Stability for Three Cohorts: Percentage of Children in Care with Two or Fewer Placements, January to June 2021



Source: FACES.NET report PLC234

Conclusion

CFSA considers this measure partially met. CFSA met the benchmark for Cohort 1 in January 2021 and fell only slightly below the benchmark (1-3 percentage points) in the remaining months during

this period. Performance has improved since 2020 when the range was between 76-81 percent and CFSA continues to reliably meet or exceed required performance for Cohorts 2 and 3.

20. Placement Disruption

Measure

CFSA shall reduce overall placement disruptions to 35 or fewer disruptions per month.⁷³

Methodology

To assess performance, CFSA manually tracks the number of placement disruptions each month, as reported for cases managed by CFSA and private providers. CFSA and private agency program managers detail the reasons that lead to each disruption. CFSA analyzes the manual data to verify that the placement move was a disruption, assess trends, identify needs and resources, and assist in placement stability.

2021 Performance

During the performance period of January 2021 to June 2021 disruptions per month never exceeded 35; the number of monthly disruptions ranged from 20 to 34.⁷⁴

Historic Information

CFSA developed this new measure first to examine placement matching and subsequently improve placement stability. To do so, program managers identify both why placements were unsuccessful and what placements and supports could better match the child's needs. Improved matching might require additional assessments of a child's needs and more tailored supports or services for the caregiver and the child. CFSA selected the target of no more than 35 placement disruptions per month based on the average number of monthly disruptions during the calendar year 2020, which ranged from 17 to 50 disruptions.

Analysis

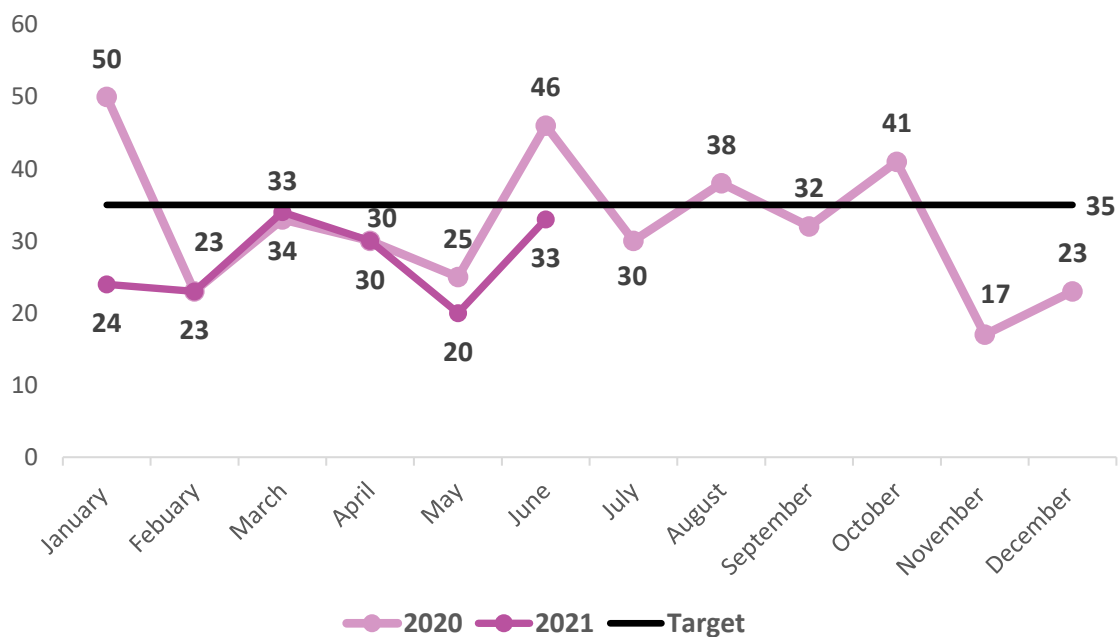
The monthly number of placement disruptions during this period ranged from a high of 34 in March 2021 to 20 in May 2021. CFSA and the private agency program managers reported that caregiver requests for a change of placement accounted for 38 percent (60 of 159) of the disruptions. Program managers further determined that verbal and physical aggression in addition to property damage were the leading causes for placement disruptions month over month. Although placement disruptions have not exceeded the 35 target, CFSA and the private agency program managers continue to examine methods for improving overall placement stability. For example,

⁷³ **Placement Disruption** –The following reasons for a placement move are considered “placement disruptions”: (1) provider is unwilling or unable to care for child, (2) provider cannot meet the child's behavioral or medical needs (3) provider's contract ended and the child moved from their current foster home as a result or (4) the child does not return to the same placement provider after a trial home visit, respite, acute hospitalization, runaway episode, incarceration or attending a post-secondary education/vocational program.

⁷⁴ January 2021: 24 disruptions, February 2021: 23 disruptions, March 2021: 34 disruptions, April 2021: 30 disruptions, May 2021: 20 disruptions, June 2021: 33 disruptions.

placement resource development specialists utilize short-term diagnostic and emergency placements to identify the most appropriate long-term placement matching for children. These placements include Sasha Bruce and SOAR (Stabilization, Observation, Assessment, and Respite Care) homes. Additionally, whenever possible, both CFSA and the private agencies incorporate pre-placement visits with potential resource parents before a placement change to ensure the children and caregivers agree that the placement is the best fit.

Figure 31. Placement Disruptions, 2020-2021



Conclusion

CFSA considers this measure achieved.

21. Placement in an Emergency Shelter

Measure

No child shall remain in an emergency, short-term or shelter facility or foster home for more than 30 days.

Methodology

To assess performance, CFSA used FACES.NET data to identify which children remained in emergency, short-term or shelter facilities or foster homes for more than 30 days, and whether moving a child before 30 days would not have been in the child's best interest.

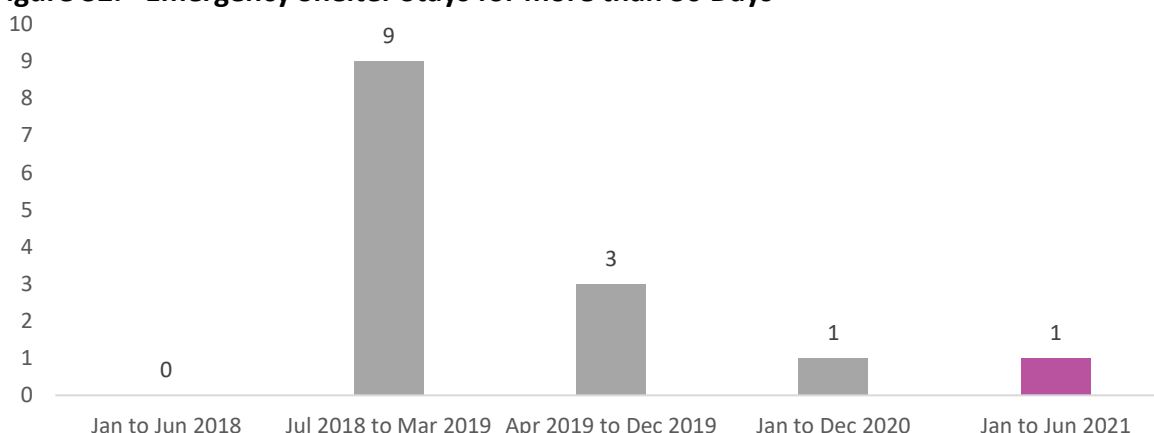
2021 Performance

CFSA placed one child in an emergency shelter facility for more than 30 days.⁷⁵

Historic Information

CFSA's performance on this measure has improved in recent years. During January and June 2018, no child stayed in an emergency shelter for more than 30 days and between July 2018 and March 2019, there were nine children in an emergency shelter beyond 30 days. Since April 2019, the number of children staying in emergency shelters beyond 30 days has decreased for two consecutive performance periods. Since 2020, emergency placements have been stable with one child placed beyond 30 days per performance period.

Figure 32. Emergency Shelter Stays for more than 30 Days



Analysis

During the current performance period, CFSA placed one child in an emergency shelter for more than 30 days. Emergency shelter placements are carefully monitored on a frequent basis by the Placement Administration. Pursuing more permanent placement options begins immediately after placement in an emergency shelter with regular meetings between the placement resource development specialists and the Placement Administration. There were a total of 21 instances where CFSA placed children in an emergency shelter during this performance period. Of 17 unique children, four children experienced two non-consecutive stays during the time period. However, as mentioned previously, only one youth stayed beyond 30 days.

The one youth who ultimately was placed in an emergency shelter for more than 30 days was placed with a resource parent before the 30-day period elapsed. However, upon the foster home placement, and because the youth felt safe with the resource parent, the youth disclosed a previous assault that occurred in the community where the resource parent resided. Due to the proximity of the circumstances in the resource parent's neighborhood, and after staying with the resource parent for one night, CFSA made the clinical decision to return the youth to Sasha Bruce

⁷⁵ The child was awaiting admittance to a psychiatric residential treatment facility (PRTF) which extended the emergency shelter stay by seven days past the 30-day maximum stay allowed.

while waiting for admission to a PTRF. The admission occurred 37 days after the initial placement at Sasha Bruce.

Conclusion

CFSA considers this measure not achieved.

22. Overnight Stays

Measure

No child shall stay overnight in the CFSA office building.

Methodology

To assess performance, CFSA notifies the Independent Verification Agent within 24 hours of any instances in which a child remains overnight at the CFSA office building. Within such notification, CFSA provides the reason for the overnight stay and efforts to secure appropriate placement.

2021 Performance

Four children stayed overnight.

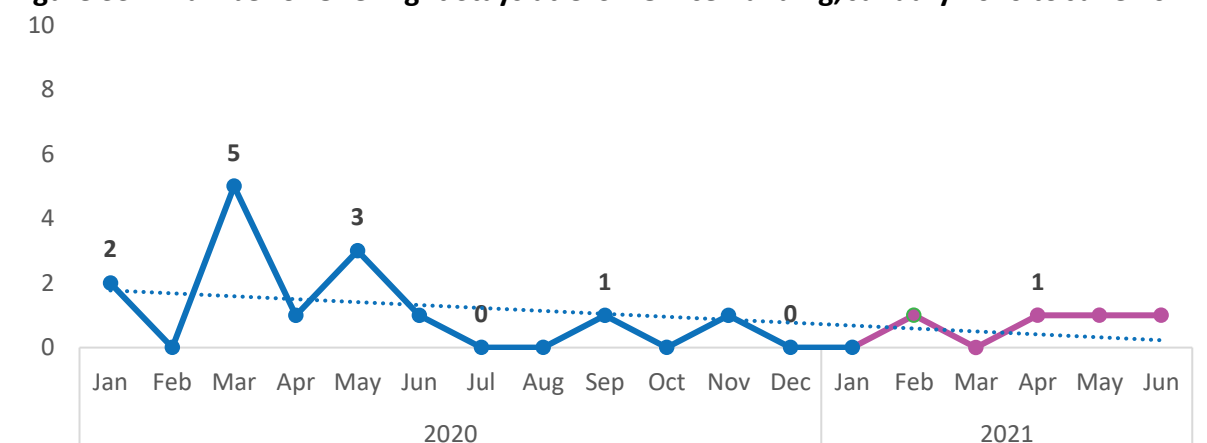
Historic Information

Current performance reflects a significant improvement from the height of overnight stays in the building in 2019 when there were 62 overnight stays, experienced by 33 unique children in the building between April and December 2019. During January to December 2020, there was a total of 14 overnight stays experienced by 13 unique children.

Analysis

Figure 33 below shows the number of overnight stays experienced by children in foster care each month from January 2020 to June 2021.

Figure 33. Number of Overnight Stays at CFSA Office Building, January 2020 to June 2021



Of the four children who experienced an overnight stay in the CFSA building from January to June 2021, three were teenagers, aged 13, 14 and 17, each with extensive trauma histories.

Placements were identified for each youth the day after the overnight stay occurred. The remaining child was five years old and an initial entry from an In-Home case who was also placed the day following the overnight stay episode.

CFSA has implemented several placement initiatives since the start of 2020 that have contributed to the decline in the number of overnight stays. Most recently, CFSA has recruited, identified and hired four trauma informed professional parents for youth aged 8 to 12 as agreed to in CFSA's settlement addendum commitment. By September 30, 2021, CFSA selected 4 resource parents with a capacity of 8 beds. Two of the parents were licensed as of December 31, 2021, and a third parent will be licensed by January 15, 2022. The fourth parent who was initially selected withdrew their name from consideration. A replacement parent was selected and will be licensed no later than March 2022. A detailed analysis of placement initiatives implemented by the Placement Administration can be found in the Appendix.

Conclusion

CFSA considers this measure not achieved.

24. Services to Families and Children

Measure

In 80 percent of cases, appropriate services, including all services identified in a child's or family's safety plan or case plan shall be offered along with an offer of instruction or assistance to children/families regarding the use of those services. Performance is based on the QSR Implementing Supports and Services indicator.

Methodology

The Implementing Supports and Services indicator from the QSR protocol measures CFSA's performance on appropriate service provision that promotes the goals of safety, permanency, and well-being for families and children.

In CY 2019, CFSA changed the methodology for determining performance on this measure. Previously, the Agency used a combination of performance on two QSR indicators to assess performance. The methodology now utilizes ratings from one indicator, focusing on specific supports and services that are put in place for families involved with CFSA and its private agency partners. For the case to receive an overall acceptable rating, the supports and services provided to the child, mother, father and caregiver (when appropriate) must each be rated as acceptable. The indicator looks at performance across in-home and out-of-home cases. Reviews on out-of-home cases began in July 2021 and therefore are not included in this report.

2021 Performance

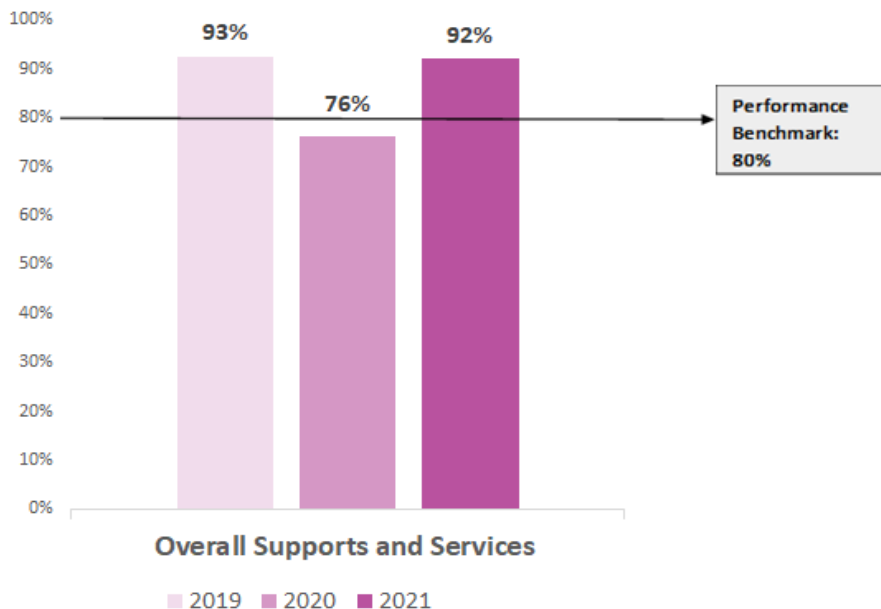
QSR reviewers rated 92 percent (58 of 63) of In-Home cases as acceptable for the Implementing Supports and Services indicator in CY 2021. This is partial year data and includes all In-Home cases that were reviewed between January and June 2021.

Historic Information

Services to families and children to promote safety, permanency, and well-being continue to be central to CFSA's work. The Agency uses QSR data to assess this performance on a case-by-case basis. By means of qualitative metrics, the QSR Unit determines the appropriateness of the service referrals for meeting an individual family's needs, as well as the family's participation in the service and the service's effectiveness for promoting the achievement of permanency goals and a family's stabilization.

In CY 2020, the QSR Unit reviewed 42 In-Home cases and rated 76 percent (32 of 42) as acceptable, narrowly missing the 80 percent benchmark. This was a decline for In-Home, who exceeded the 80 percent benchmark in CY 2019.

Figure 34. In-Home QSR Performance on Supports and Services Indicator, CY 2019 to CY 2021

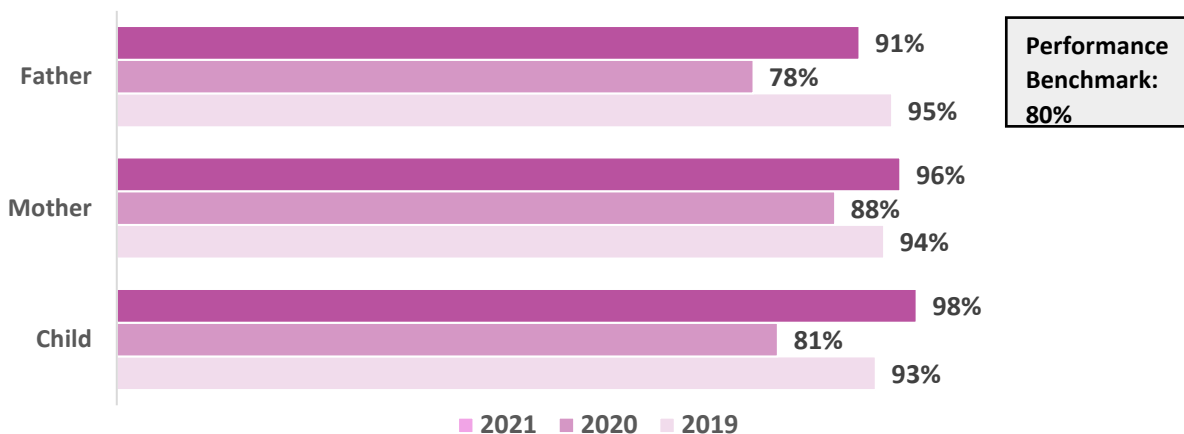


Analysis

For the in-home cases that CFSA has reviewed in CY 2021, performance has improved since CY 2020. Specifically, in CY 2021, the QSR Unit rated 58 of 63 (92 percent) In-Home cases as acceptable on all sub-parts of the Implementing Supports and Services indicator, a 16 percent improvement from CY 2020 where 76 percent of cases were rated as acceptable. This improvement in performance for all In-Home cases was due in a large part to an Agency cross-administration collaborative focus to ensure that supports and services to children and families met the identified needs. With regard to specific CY 2021 sub-parts of the indicator, there was a 17-percentage point increase for children receiving acceptable services from 81 percent in CY 2020 to 98 percent in CY 2021. This increase also reflects an improvement in the assessment of children, which realized a 12-percentage point increase from 88 percent in CY 2020 to 100 percent in CY 2021. Overall, these ratings indicate a strong array of supports and services that matched the intervention strategies

identified in the child and family’s current plans, substantially helping the child and family meet their needs and make progress toward planned permanency and stabilization outcomes.

Figure 35. In-Home QSR Performance on Supports and Services by Subpart, CY 2019 - 2021



Conclusion

Not yet due. Performance will be reported in the July-December 2021 public performance report once Out-of-Home performance is also included.

25. Case Planning

Measure

80 percent of cases will achieve an acceptable rating on the Quality Service Reviews (QSR) Planning Interventions indicator.

Methodology

The Planning Interventions indicator from the QSR protocol measures CFSA’s performance on the appropriateness and quality of case planning. The indicator looks at performance across in-home and out-of-home cases. Reviews on out-of-home cases began in July 2021 and therefore are not included in this report. In CY 2019, CFSA changed the methodology for determining performance for this measure. Previously, the Agency used a combination of performance on two QSR indicators, the Planning Interventions indicator and Pathway to Case Closure indicator to validate performance. The methodology now utilizes ratings from only the Planning Interventions indicator, focusing on the specific planning activities related to advancing the case goals that ultimately drive the family’s permanency objectives.⁷⁶

2021 Performance

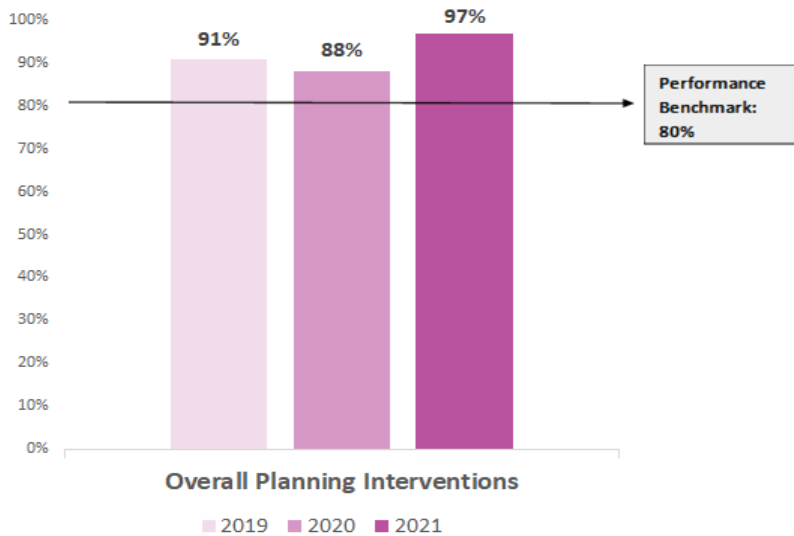
QSR reviewers rated 97 percent (61 of 63) of In-Home cases as acceptable for the Planning Interventions indicator in CY 2021.

Historic Information

⁷⁶ In order to get an overall acceptable Planning rating, the sub-indicator for safety must be acceptable, and a majority of the other rated sub-indicators must have an acceptable rating.

CFSA achieved this measure with In-Home reaching or exceeding the benchmark in CY 2019 – CY 2020.

Figure 36. In-Home QSR Performance on Planning Interventions Indicator, CY 2019 - 2021



Analysis

Timely and effective case planning at the beginning and throughout a child and family's child welfare involvement is crucial for achieving permanency and meeting children's needs for safety and well-being. Effective case planning depends upon successful engagement with the family, concurrent to teaming with formal and informal supports. Case plans should identify specific services, supports, and timetables for providing services needed to achieve identified goals, including permanency outcomes.

CFSA has achieved the required level of performance for In-Home cases managed by CFSA for the third consecutive calendar year. In CY 2021, performance improved beyond the 91 percent of cases with acceptable ratings in 2019 and 88 percent of cases with acceptable ratings in 2020 to reach 97 percent acceptable ratings. This overall increase over the past 3 years demonstrates that teaming and engagement were effective and birth parents functioned as partners in the case planning process. The Agency supported and incorporated birth parents' choices regarding case goals and objectives. Effective teaming helped families outline their objectives for succeeding in their daily lives after exiting the child welfare service system.

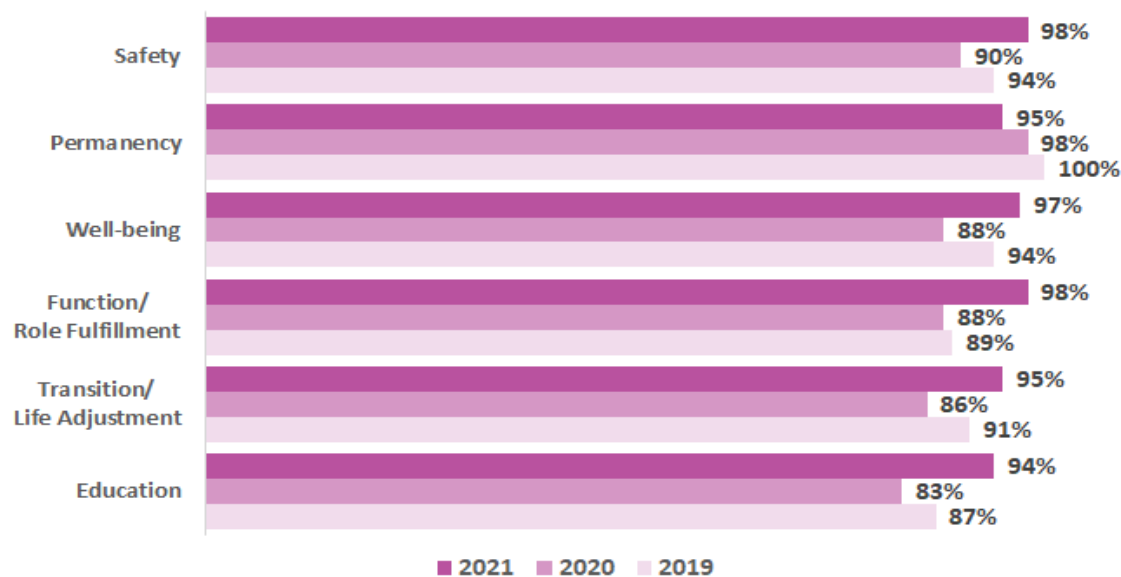
The CY 2021 QSR findings on In-Home cases revealed that strategies are meeting targeted needs to achieve safety, permanence, and well-being for children. Families are receiving the appropriate services and support to enhance their ability to address identified needs. With parents being at the forefront of the decision-making process, case planning improves parental capacity to provide appropriate care and supervision of their children and to maintain stability of their homes.

QSR findings also revealed the strong partnership established between the QSR team and the In-Home Administration. Their collaboration has promoted quality practice through ongoing Continuous Quality Improvement (CQI). This partnership has also provided opportunities to carefully track and monitor program strategies for effectiveness. The In-Home Administration's consistent performance improvement over the past 3 years is largely due to the deliberate emphasis on CQI and the QSR teaming

process. For example, one area of practice for In-Home that has been a primary CQI focus is assessment of birth fathers. In 2018 this was rated at 52 percent acceptable, significantly below the 80 percent margin. Through targeted strategies developed using information gathered from the QSR and the QSR team attending unit meetings to monitor progress, there was a 25-percentage point improvement in 2019 to 77 percent of cases rated as acceptable for assessment of birth fathers, followed by a slight decline of 5 percent points in 2020 to 71 percent.

The QSR team continued to partner with the In-Home team through ongoing discussion at case presentation to identify what was working well in practice and strategies for social workers having a more comprehensive assessment of fathers. The QSR team continue to attend unit meetings, as well as participate in the monthly Multi-Administration Clinical Staffing (MASC) to monitor progress and address any barriers. These efforts resulted in significant improvement of 19 percentage points to 90 percent of cases being rated as acceptable for assessment of birth fathers in the 2021 QSR.⁷⁷

Figure 37. In-Home QSR Performance, Planning by Subpart, CY 2019-CY 2021



Conclusion

Not yet due— performance will be reported in the July-December 2021 public performance report once Out-of-Home performance is also included.

⁷⁷ The Multi-Administration Clinical Staffing (MACS) is a multidisciplinary team approach used to assess In-Home cases that have been stagnant and/or shown little improvement.



WELL-BEING

The tenet for this pillar is that every child has a right to a nurturing environment that supports healthy growth and development, good physical and mental health, and academic achievement. Children should leave foster care better than when they entered.

For the January-June 2021 reporting period, there were two Well-Being Performance Standards related to children's health care:

- Children in foster care receive a full medical evaluation within 30 or 60 days of entering care.
- Children in foster care receive a full dental evaluation within 60 days of entering care.

The July-December 2021 performance period will also report on the following additional standards:

- Youth in foster care get an appropriate education and meet expected milestones; youth graduate from high school.
- Youth in foster care pursue activities that support their positive transition to adulthood; youth have employment or internship experience.

The programs and services included in the Well-Being pillar are primarily supported through CFSA's Office of Well Being (OWB). OWB provides clinical supports and a service array that aligns with the health, wellness, educational, and other needs of children and families involved in the District's child welfare system. OWB is largely responsible for activities that support the physical,

emotional, developmental, and behavioral health of children in foster care. Under the purview of OWB, the Healthy Horizons Assessment Center (HHAC) provides medical screenings, comprehensive medical exams, assessments, and referrals for the health of children and youth in the foster care system.

As noted by CSSP in prior monitoring reports, “CFSA and its private agency partners are responsible for ensuring that children in care have their health and dental needs met, including regular, comprehensive evaluations. These screenings and assessments are important to identify health conditions that require prompt medical attention, chronic medical needs, and developmental or behavioral health concerns. To support the child’s health, information about a child’s health needs and status must be shared immediately with the child’s foster parent or caregiver, social worker, and other service providers, so that a treatment plan can be developed.” During this reporting period, there have been delays that have impacted the 30-day or 60-day timeframes due to extended wait times for appointments and limited availability with dental providers, and children, youth, and families needing to quarantine due to the COVID-19 pandemic.

In addition to the efforts discussed above, the LaShawn Settlement Agreement required CFSA to take specific actions in 2020 and 2021 to ensure accessibility for clinical and therapeutic services, please see Table 14 below for more information and status as of June 30, 2021.

During the current monitoring period, CFSA achieved the required level of performance for comprehensive medical exams for children entering foster care. However, the Agency did not achieve the required level of performance for comprehensive dental exams.

Table 14. Ongoing Commitments

Commitment	Status as of June 30, 2021
<p>Commitment A.</p> <p>Maintain a minimum of four in-house behavioral health therapists, a behavioral health clinical supervisor, and a psychiatric nurse practitioner.</p>	<ul style="list-style-type: none"> ■ CFSA maintained the required staffing for the in-house mental health unit during this time frame. ■ There were 130 initial entries or re-entries into foster care and one additional referral for mental health services for a child from the foster care population for possible enrollment into in-house mental health services. ■ Of the 131 total children, 83 were ineligible for in-house mental health services primarily due to the following reasons: 54 percent (n=45) were under the age of 5 and 30 percent were already connected to services (n=25) prior to removal. There were 48 children eligible for evaluation. ■ Of the 48 eligible children, 81 percent⁷⁸ (n=39) received a mental health evaluation within 45 days of entry into foster care which is in alignment with the Office of Well Being business process. ■ Of the 39 children evaluated, 51 percent (n=20) were recommended for therapy. ■ Nineteen of the 20 children (95 percent) recommended for therapy received therapy services. Sixty percent (n=12) began therapy with CFSA's in-house therapy unit. 100 percent had services initiated within 60 days except for one youth starting services within 30 days. Of the eight youth who did not start services with CFSA's in-house therapy unit, seven youth were

⁷⁸ Of the 9 children who did not receive an evaluation, 3 children exited foster care within one week of their placement in foster care, and the other six children were connected to a CSA instead of being assessed for therapy with CFSA's in-house therapy unit.

Commitment	Status as of June 30, 2021
	referred to a core service agency (CSA) after the evaluation for ongoing mental health services ⁷⁹ and one youth refused to participate, and therefore did not receive mental health services.
<p>Commitment B.</p> <p>Maintain a contract (or if determined necessary, enter into additional contracts) with a core service agency (or a mental health provider capable of offering the same array and level of services) to provide support and specialized therapeutic and crisis stabilization services to children in foster care aged 5 and over and their families who need ongoing behavioral health support through various therapeutic modalities. The contract will provide for the ability to serve 150 children and families each year.</p>	<ul style="list-style-type: none"> CFSA also maintained the contract with the CSA, MBI Health Services LLC (MBI), for longer-term mental health services. There were five youth who needed longer-term mental health services through MBI. Of these youth, 80 percent (n=4) were older youth (age 13-17); and one youth was between 6-12 years old. One parent was also referred for services with MBI.

⁷⁹ Youth may be referred to a CSA instead of CFSA's in house therapy unit for one of the following reasons: there is a need for community-based intervention (CBI) or a community support worker (CSW) which is not provided by the CFSA in-house therapy unit, or youth will need psychotropic medication for an extended period of time. In these instances, there can be better coordination of mental health services through receipt of services from a CSA. In addition, if in-home therapy is requested the youth will also be connected to a CSA.

26. Comprehensive Medical Evaluations

Measure

85 percent of children in foster care shall receive a full medical evaluation within 30 days of placement; 95 percent of children in foster care shall receive a full medical evaluation within 60 days of placement.

Methodology

To assess performance, CFSA analysts used FACES.NET management reports for tracking data compliance with this measure.

2021 Performance

There was a monthly range of 80 to 97 percent for children receiving a full medical evaluation within 30 days of entering care; there was a monthly range of 90 to 97 percent of children receiving a full medical evaluation within 60 days of entering care.

Historic Information

CFSA and its private partners are responsible for promoting, supporting, and planning for the overall well-being of children in foster care, including their receipt of appropriate and routine medical care. CFSA's Office of Well-Being, which includes the Healthy Horizons Assessment Center (HHAC), is largely responsible for activities that support the physical, emotional, developmental, and behavioral health of children in foster care.

Due to CFSA regularly meeting this measure, it was not part of the Exit and Sustainability Plan¹ (ESP) and this measure was not reported on during the ESP. During the last monitoring period of the Implementation and Exit Plan² (IEP), in July 2018-March 2019, CFSA achieved 89 to 95 percent within 30 days of placement (exceeding the required level of 85 percent) and between 95 to 99 percent for evaluations completed within 60 days of placement (meeting or exceeding the required level of 95 percent). This measure was added back into the Four Pillars Performance Framework to ensure that CFSA was holistically reporting on children's health evaluations upon their entry into care.

Analysis

Within the 6-month period for which staff reported data for children receiving medical evaluations within 30 days of placement, CFSA met the required performance for 4 months out of the 6 months; CFSA met the required performance for 5 out of the 6 months for children receiving medical evaluations within 60 days of placement. CFSA identified several barriers when the benchmark was not met in 2 months for the 30-day and 1 month for the 60-day benchmark. The benchmark was impacted by the teen and older youth population who were in abscondence during the timeframe an evaluation was to be received. Additionally, there were teens and youth who needed to quarantine due to COVID-19 and subsequently were not able to attend a medical evaluation appointment in the 30-day or 60-day timeframe as scheduled.

CFSA expects all children to receive a comprehensive medical evaluation when they enter care or change placements. CFSA's HHAC is the onsite resource that allows for medical screenings to be scheduled in real time as soon as the child enters foster care or changes placement. Medical appointments are easier to schedule within the 30- and 60-day benchmark timeframes given the accessibility of this resource. CFSA also continues to monitor this measure monthly to ensure that children in Out-of-Home placements receive timely access to appropriate health care. Monthly monitoring also addresses any identified barriers to timely access. CFSA staff works diligently with families to assist with rescheduling of missed appointments, providing transportation when necessary to facilitate appointments, and coordinating any additional follow-up appointments to complete a timely medical examination when necessary.

Figure 38. Percentage of Children in Care with Full Medical Evaluation at 30-Days

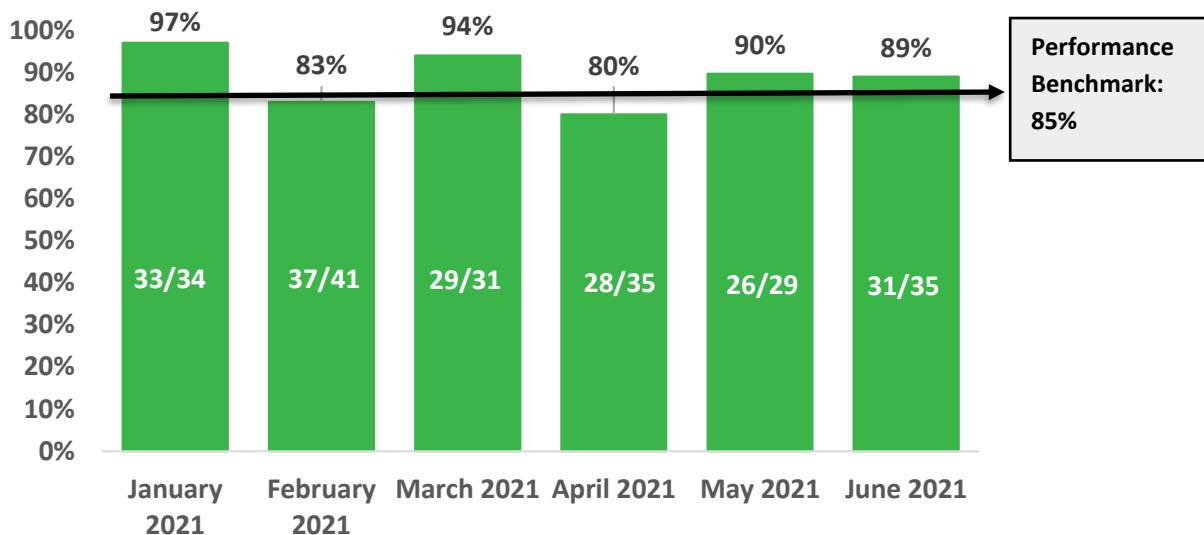
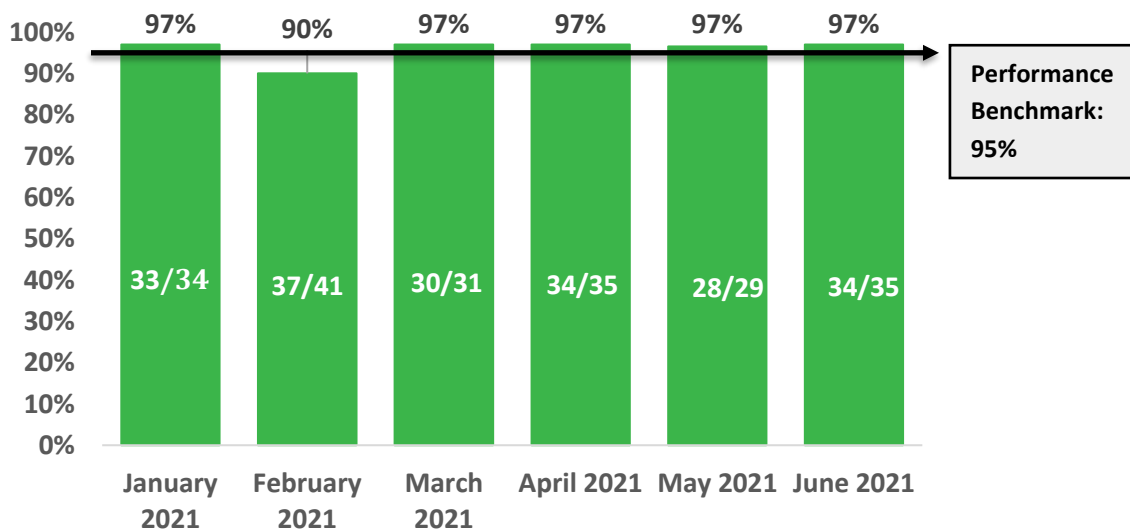


Figure 39. Percentage of Children in Care with Full Medical Evaluation at 60-Days



Conclusion

CFSA considers the months in which the measure was narrowly missed to be insignificant deviations and therefore this measure is achieved.

27. Comprehensive Dental Evaluations

Measure

75 percent of children in foster care shall receive a full dental evaluation within 60 days of placement.

Methodology

To assess performance, CFSA analysts used FACES.NET management reports for tracking data compliance with this measure.

2021 Performance

There was a monthly range of 33 to 82 percent for children receiving a full dental evaluation within 60 days of entering care.

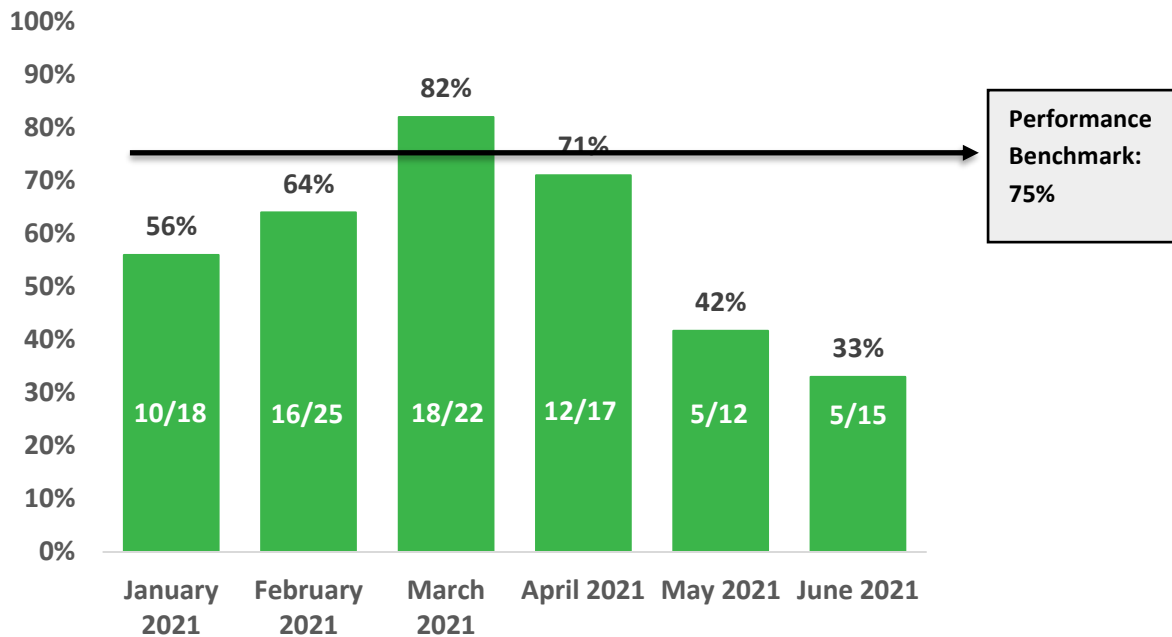
Historic Information

CFSA and its private partners are responsible for promoting, supporting, and planning for the overall well-being of children in foster care, including their receipt of appropriate and routine dental care. The benchmark for this measure changed from the *LaShawn* ESP to the Settlement Agreement reached between the parties. The three benchmarks for assessing performance for this measure as a part of the IEP and the ESP was 25 percent of children shall receive a full dental evaluation within 30 days of placement, 50 percent of children shall receive a full dental evaluation within 60 days, and 85 percent of children shall receive a full dental evaluation within 90 days of placement. Upon the implementation of the Four Pillars Performance Framework in 2021, this measure was revised to only include the percentage of children with a dental evaluation within 60 days, and the benchmark was raised from 50 percent to 75 percent. During the last monitoring period of the IEP (January 1 – December 31, 2020), CFSA achieved a monthly range of 32 to 73 percent of children who received a full dental evaluation within 60 days of placement. The 60 days benchmark is provided as a historical reference to provide context for the current performance. The COVID-19 pandemic and closure of dental offices and long waiting lists when dental offices re-opened significantly impacted performance for much of 2020.

Analysis

During the current monitoring period, a monthly range of 33 to 82 percent of children received a full dental evaluation within 60 days of entering care (see Figure 40).

Figure 40. Percentage of Children in Care with Full Dental Evaluation at 60-Days, January – June 2021



CFSA did not meet the required performance during 5 of the 6 months for data reported on dental evaluations within 60 days of a child’s placement. CFSA identified several barriers to achieving this benchmark. The teen and older youth population remained difficult to engage and participate in scheduled dental appointments. Subsequently, missed appointments could not be rescheduled within the 60-day time-frame of the youth’s placement. Residual effects of the COVID-19 pandemic resulted in extended wait times for appointments and limited availability with dental providers. Another challenge to meeting this benchmark has been competition with the public for securing dental appointments. CFSA also recognized that some children entering foster care with special needs (e.g., autistic spectrum disorder) required special accommodations, like sedation to complete a comprehensive dental evaluation. CFSA identified Children’s National Medical Center as the one provider available to accommodate those specialized needs; however, there could potentially be a 3-month waiting period for scheduling a dental evaluation with modified requirements.

The sample of children in this population is small, which impacts the margin of variation for meeting compliance. CFSA analysts and program staff are currently partnering with the Agency’s Child Information Systems Administration to develop more efficient tracking methods for these data moving forward. The Agency intends also to account for those children who may have had additional time to meet the benchmark but whom management reports consider non-compliant due to a logic error in the monthly management report.⁸⁰ CFSA currently monitors this data monthly and will continue to closely examine tracking barriers for children who haven’t had their dental exam.. Lastly,

⁸⁰ Managements reports pulled on the 15th of the month contain the final data for the prior month. For children who are nearing the 60-day mark and who came into care between the 15th and final day of the month, the logic error results in them immediately dropping out of the applicable population when they have been in care for 60 days, even if during the prior month they had not received their dental yet but had not yet been in care for the full 60 days.

as of August 27, 2021, CFSA's Health Services Administration has implemented a new process to send bi-weekly out-of-compliance notifications" to program areas with outstanding or undocumented data on completed medical and dental evaluations.

Conclusion

CFSA considers this measure not achieved, and notes that residual effects of the COVID-19 pandemic continue to create challenges in meeting this benchmark if specialized dental services are needed or appointments need to be rescheduled.



EXIT TO PERMANENCE

The key value that undergirds this pillar is that every child and youth exit foster care as quickly as possible to a safe, well-supported family environment or life-long connection. Older youth have the skills they need to succeed as adults.

Three of the four measures that fall under Exit to Permanence Pillar were achieved:

- Timely adoption
- Aging out of foster care
- Exiting care with stable housing

There were challenges for youth to enroll in or complete vocational training and certificate programs. This measure was not achieved during the performance period.

COVID-19 Impact

There have been both direct and indirect effects of the COVID-19 pandemic during the January-June 2021 period. Some of CFSA's findings speak to these effects, notably the Family Court's limited ability to conduct in-person evidentiary hearings. Evidentiary hearings include neglect trials, goal change trials, adoption trials, and guardianship trials. On September 1, 2020, all Family Court judges had their own virtual courtrooms and began rescheduling events that had been delayed. These court delays have had a direct and negative impact on CFSA's work to achieve timely reunification, guardianship, and adoption.

The District of Columbia's recent legislation, *COVID-19 Response Supplemental Emergency Amendment Act of 2020*⁸¹ and the *Coronavirus Support Temporary Amendment Act of 2021*⁸², included a provision to support youth scheduled to transition out of foster care during the pandemic. The provision allows the Agency to retain custody of a consenting youth who turns 21 during the period under which the Mayor has declared a public health emergency, and for the custody to last up to 90 days after the emergency has ended. It is difficult to assess further COVID-19 impact until enough time has passed after the pandemic. Per the Mayor's Order 2021.096, extended stay foster care for youth over 21 ended on October 25, 2021.

Strategies for Improving Permanency

There has been notable and consistent effort to improve the permanent outcomes of children and youth at CFSA. In FY 2020, CFSA launched the **Permanency Tracker data system**: a single source of up-to-date, accessible information on the status of any child on their path to permanency, as well as information across children on progress to permanency. The Agency developed the system using MicroStrategy after analysis identified **74 key milestones from removal to reunification, adoption, or guardianship**, of which only 23 percent were accessible in FACES. The remaining 77 percent of the milestones were entered as manual data and held across eight different program areas. The Permanency Tracker has enabled CFSA to combine the manual data with what is held in FACES, presenting a more comprehensive view of permanency practice.

Eight Key Permanency Milestones

The Permanency Tracker is also used as a management tool to identify case-specific as well as systemic barriers to permanency. While the system holds more than 50 metrics, its "Timeline Dashboard" enables monitoring of progress on eight milestones that are particularly critical:

1. **Completion of a Removal Family Team Meeting (FTM).** This intervention, undertaken shortly after a child comes into care, is used to build early parental engagement. The information shared, and the relationships developed during the removal FTM can have significant impact on the case, especially in the early months.
2. **Completion of a 1:1 orientation.** This early meeting between a member of the PEER Unit and the caregivers from whom a child was removed supports understanding of Agency processes and requirements, and further solidifies parental engagement as the case gets underway.⁸³

⁸¹ <https://lims.dccouncil.us/Legislation/B23-0733>

⁸² <https://lims.dccouncil.us/Legislation/B24-0140>

⁸³ The PEER Unit (Parent Engagement, Education and Resource) comprises CFSA staff with first-hand caregiver experience with the child welfare system.

3. **Movement of a family to unsupervised visitation.** Unsupervised visits between parents and children are a necessary precursor to reunification. This step should be taken as soon as safely possible for the family.
4. **Recommendation of a goal change to the court.** As soon as the Agency has determined that reunification is no longer a viable permanency goal, a formal goal change recommendation must be made, so that the required Ta.L. evidentiary hearing process can be completed.⁸⁴
5. **The filing of an adoption petition.** For children with a goal of adoption, until a petition has been filed by the intended permanency resource, further legal progress on the case is effectively stalled.
6. **The filing of a guardianship motion.** For children with a goal of guardianship, until a motion has been filed by the intended permanency resource, further legal progress on the case is effectively stalled.
7. **The completion of the adoption or guardianship trial.** A child for whom a petition or motion has been filed cannot progress towards finalization until the trial is completed.
8. **Finalization of an adoption or guardianship by the court.** Following the trial, the Agency's submission of a final report and the court's issuance of a final decree are required to close the case.

Each of the above milestones has a target that was developed based on 6 months of baseline data. Using these targets as guideposts, managers can track where individual children are “stalled” in their progress to permanency and develop and implement case-specific solutions. Managers also determine where their units and teams may be struggling to make or sustain progress. In addition, the Permanency Tracker provides CFSA with the newfound capacity to identify where delays in permanency are attributable not just to the Agency, but to the court and legal systems. CFSA can then use this information to advocate for the following needed adjustments:

- CFSA has been able to increase the rate of unsupervised visits by using the data on this metric to push for practice adjustments in units where the intervention was not prioritized.
- Agency analysts reviewed the guardianship caseload against the metrics to ascertain whether the guardianship goal is appropriate case-by-case. As needed, case-carrying social workers can then work towards a goal change.
- CFSA has used subsidy timing data to identify whether delays occurred within the referral process, the negotiation process, or the completion of the subsidy. Staff then adjusted communications and duty structures to address the trouble spots.

⁸⁴ In a December 2016 case (“In re Ta.L.”), the D.C. Court of Appeals held that parents have the right to an evidentiary hearing before the court changes the goal of a case away from reunification. The ruling in Ta.L. means that to change a child's permanency goal, the agency must serve notice of a plan to change the goal and prevail in the hearing.

- The Agency is actively working with the courts and other external advisers on effective responses to timeliness issues identified in the scheduling of trials and hearings, issuance of findings, and finalization of adoptions and guardianships.

Finally, the Permanency Tracker was designed and created as an iterative tool that is responsive to practice changes and needs. CFSA will continue to assess how it can best be used to promote positive permanency for children and youth in foster care.

A Permanency Goal Review Meeting (PGRM) is a brief, multi-disciplinary case review aimed at resolving barriers to permanency. There are two types of monthly PGRMs:

- **100-Day PGRMs** review cases where a child reaches 100 days in foster care or 100 (or more) days in protective supervision.
- **Targeted PGRMs** review cases roughly every 3 months, starting when a child has been in foster care for 9 months, with specific intervals based on their permanency goal.

PGRM data provide nuances to simple exit rates by specifying the challenges children and families face as they seek permanency. By the end of this fiscal year, reporting capacity on the case barriers and next steps discussed during PGRMs will be available for analysis. The PGRM information will then enable more accurate decision-making about resource allocation within CFSA, as well as supporting a stronger advocacy agenda with sister agencies and community partners.

OLDER YOUTH OUTCOMES

Overview

CFSA's Office of Youth Empowerment (OYE) supports all youth in foster care aged 15-23 by providing information, guidance, and referrals in such areas as housing, education, employment, vocational training, parenting, finance, life skills, healthcare, public benefits, and community connections. CFSA and the contracted private providers provide case management for youth in foster care ages 15-21. As of June 30, 2021, there were 245 youth in this age group.⁸⁵

Youth Transition Planning (YTP) meetings, which begin at age 14, are a key component of OYE's supportive framework as these meetings provide an opportunity for the youth, social worker, caregivers, attorneys, and various specialists to assess the youth's status, resources, and trajectory toward stable and successful independence. To determine the nature and immediacy of need for supportive interventions, OYE evaluates the status of each youth using a color code:

⁸⁵ In addition to supporting youth in foster care, aged 15 to 21, OYE provides aftercare services to participating young adults, from age 21 to 23, to assist in their transition from foster care to independence. Due to the provisions of the Consolidated Appropriations Act of 2021, OYE has extended services to all willing young adults up to age 26.

- **GREEN:** The youth is on the right trajectory toward meeting the identified permanency goal. There are limited to no challenges in the areas of education, employment, independent living skills and mental health.
- **YELLOW:** The youth is progressing toward the identified permanency plan, including stabilization in the areas of education, employment, and mental health. However, continued work may be required in one or more independent living categories.
- **RED:** The youth is struggling in the areas of permanency planning, mental health, education, and overall independent living skills. The youth has high incidences of abscondence, unusual incident reporting, and increased levels of aggression and crisis. Limited progress has been made in the youth's aftercare plan despite teaming efforts.

OYE assessed the status of each youth on this system using point-in-time population data for April 22, 2021 (n=244). Of the 244 youth ages 15+, GREEN status was assigned to 85 youth (35 percent) across all providers in the District's foster care system, YELLOW status was assigned to 91 youth (37 percent), and RED status was assigned to 68 youth (28 percent).

For all youth who age out of foster care, OYE conducts an additional meeting, the *21 JumpStart* review, 6 months prior to the youth's 21st birthday. Although facilitated by an OYE staff member, the review cannot take place without the youth present. The review functions as a quality assurance tool to ensure realistic transition planning and a successful transition from foster care. *JumpStart* reviews do not take the place of YTPs. Rather, the reviews address the same domains and involve similar discussions for mitigating barriers and developing next steps. However, *JumpStart* reviews have the added benefit of including staff who specialize in transition planning and aftercare supports. Similar to the YTP framework, *JumpStart* reviews utilize a color code to provide an overview of the youth's status and level of preparedness for a stable and successful exit from care:

- **GREEN:** The youth has a solid housing plan, has employment or is in school, and has identified at least two responsible and committed individuals as lifelong connections.
- **YELLOW:** The youth has a solid housing plan but is not employed or in school and has at least one identified lifelong connection
- **RED:** The youth does not have a solid housing plan and is not employed or in school, is incarcerated or on abscondence, and has no lifelong connections.

During January to June 2021, a total of 29 youth participated in a *JumpStart* review. At the time, 5 (17 percent) were assigned GREEN status, 17 (59 percent) were assigned YELLOW status, and 7 (24 percent) were assigned RED status. As mentioned above, the RED cases were based on housing and employment status; additionally, one of the red cases involved a youth in runaway status and another case involved a youth with mental health and substance use concerns.

During January-June 2021, a total of 9 youth aged out of foster care. Seven youth exited foster care on their 21st birthday and two youth exited prior to turning 21 (One youth turned 21 a few months after exiting foster care and another youth was 19 when they exited care⁸⁶). An additional seven youth elected to remain in foster care and receive continued Agency support as authorized by the *COVID-19 Response Supplemental Emergency Amendment Act of 2020*⁸⁷ and *Coronavirus Support Temporary Amendment Act of 2021*⁸⁸.

Of the eight youth who exited care⁸⁹, five (63 percent) had been assigned a **GREEN** status 6 months earlier during their *JumpStart* review. Among these youth, three exited to a Department on Disabilities Services (DDS) program, one was residing in a transitional housing program, and one was attending a four-year full-time college program. Two youth had been assigned **YELLOW** status: one was placed in a transitional housing program and the other had stable housing and was working toward employment.⁹⁰ One youth was assigned **RED** status due to long-term incarceration.

Education Outcomes (youth ages 15-21)

In partnership with CFSA's Office of Well Being (OWB), OYE provides educational services to promote each youth's successful completion of high school programs and to maximize their post-secondary opportunities. Services include linkages to any necessary academic supports, such as counsel to the child, caregiver, and social worker; tutors; communication with school officials; exposure to post-secondary options; college tours; assistance in the college application process; assistance in the acquisition and management of student financial aid; and various forms of reward and celebration for achieving personal academic goals, including gift cards and an annual Youth Recognition Ceremony.

During the 2020-2021 academic year, a total of 180 youth attended high school and an additional 13 were participated in GED classes. A total of 34 youth enrolled in a 4-year college program. In the July-December report, CFSA will provide further details on how many of these youth were promoted to the next grade level or graduated. As of October 2021, CFSA is still in the process of validating enrollment data self-reported by social workers for the 2021-2022 school year with

⁸⁶ The 19-year-old youth exited foster care during this time frame. This youth had been in runaway status since 2019 and was no longer residing in D.C. CFSA did have contact with the youth who had employment and housing. Because of this early exit, this youth did not participate in a *Jumpstart* Review.

⁸⁷ <https://lims.dccouncil.us/Legislation/B23-0733>

⁸⁸ <https://lims.dccouncil.us/Legislation/B24-0140>

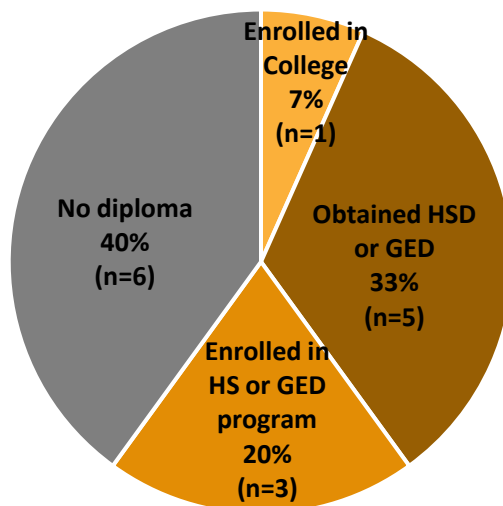
⁸⁹ This does not include the youth who exited foster care at age 19, since *JumpStart* meetings occur six months prior to the youth's 21st birthday.

⁹⁰ Upon exiting the foster care system, the latter youth's status changed to RED, due to abscondence and non-contact with the case management team.

the data in the District of Columbia Public Schools, Prince Georges County Public Schools, Montgomery County Public Schools (through data sharing agreements) and other jurisdictions where children are enrolled in school (through tuition contracts and college enrollment data).

Of the 15 youth who turned 21 during the second and third quarters of FY 2021, a total of six had their high school diploma or general education degree (GED) by the time of their *JumpStart* review. Of these six youth, three were also in the group of nine youth who exited care. Three youth were enrolled in a GED or specialized high school equivalency program at the time of their *JumpStart* review; two of these three youth exited care. One youth was attending a full-time college program.

Figure 41. Education at Age 20 ^{1/2} (n=15)



Employment and Career Training Outcomes

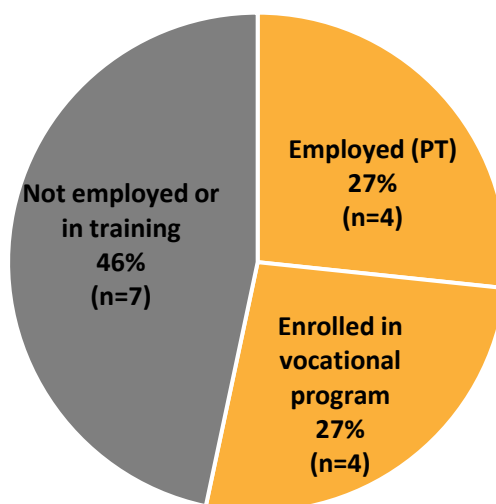
The performance measure related to employment is reported on an annual basis and is therefore not yet available for the full CY2021; however, OYE provides ongoing supports to youth to prepare them for adulthood, and therefore this information is available for January through June 2021. In addition to the vocational supports offered through OYE's educational unit, eligible youth can participate in the LifeSet program. Through this evidence-based model, OYE specialists offer youth individualized education, training, and life skill supports to enhance each youth's understanding of and capacity to pursue academic and professional opportunities. Specifically, LifeSet specialists engage youth through weekly meetings, which can include the planning of career goals; referrals for OYE services in such areas as education and financial literacy; and connections to academic programs, vocational programs, internships, and employment. During the public health emergency, engagement included unique measures to ensure the mental

health needs of youth were identified and supported. For example, specialists conducted weekly visits in community parks and provided interested youth with art supplies and books. In FY 2020, LifeSet engaged 61 youth, and as of June 30, 2021, the program engaged 41 youth.

Overall, during January-June 2021, OYE provided exposure to post-secondary options or high demand employment fields to a total of 94 youth. For example, specialists presented educational, professional development, entrepreneurship, and life skills workshops; facilitated internship opportunities; and hosted a Networking Breakfast for youth to meet local employers. OYE also provided these workshops and networking opportunities to 54 youth who were preparing for vocational training programs, internships, or employment. Additionally, OYE Specialists worked individually with these youth in such areas as job market exploration, resume development, application completion, and interview preparation. See the data for vocational training in the Vocational Programming section of this report. Employment data for foster care youth will be reported in the July-December 2021 Report.

Of the 15 youth who turned 21 during January-June 2021, a total of four were employed part time and four were attending a vocational training program at the time of their *JumpStart* review. None of the eight youth that exited care were employed at the time of their review; however, two were attending vocational training.

Figure 42. Employment and Training at Age 20 ^{1/2} (n=15)



Housing Outcomes for Youth Aging Out from Foster Care

A key component of transition planning with older youth involves housing resources. OYE maintains an ongoing dialogue with youth, their families, and their case management teams to verify that the youth has identified lifelong connections and a viable housing strategy is in place. In cases where OYE can neither verify the commitment of a stable caregiver nor the youth's capacity to achieve housing stability independently, specialists will help the youth connect with a transitional living program or obtain funding through the Rapid Housing Assistance program, which offers time-limited housing supports to promote self-sufficiency. Six of the nine youth who exited care during this time frame had stable housing upon exit. Three youth were in runaway status (n=2) or incarcerated (n=1) at the time of their exit. The six youth who exited to stable housing outcomes were living in: transitional housing (n=2) and housing for adults with disabilities (n=3). One youth entered a housing agreement with their prior foster family while also attending college away from the District.

Financial Literacy and Savings

OYE offers youth the opportunity to participate in the financial literacy program, Making Money Grow (MMG). MMG teaches youth how to manage finances and save for the future. Youth have the opportunity to participate in a matched savings program where every dollar saved is matched by Capital Area Asset Builders (CAAB). The matched CAAB funds are capped at \$500 per year for youth aged 15 to 17 and capped at \$2,000 per year for youth aged 18 to 21. Youth can access the funds to pay for a vehicle, housing, education, or entrepreneurial endeavors. In FY 2020, a total of 122 youth participated in the CAAB program, and in January-June 2021, a total of 107 were enrolled. Of the 15 youth who turned 21 during January-June 2021, four youth had participated in the MMG program.

Medicaid

Medicaid extension and termination are discussed at the *21 JumpStart* meeting. The youth is informed they are responsible for recertifying their health insurance annually and that Medicaid will communicate directly with them prior to recertification. All 15 youth who turned 21 during January-June 2021 were enrolled in Medicaid at the time of their 21st birthday.

Positive Permanency for Youth 15+

In addition to the nine children who exited foster care by aging out during January-June 2021, an additional 25 children aged 15 and older exited foster care for positive permanency reasons during this time frame. Eight children were reunified (32 percent), 11 children achieved guardianship (44 percent) and six children (24 percent) were adopted. See below for additional

breakdown of types of positive permanency exits by children ages 15-17 and children 18-20 years old.

Table 15. Positive Permanency for Children 15-20, by Exit Reason

Age group	Reunification	Guardianship	Adoption	Total
15-17	7	6	2	15
18-20	1	5	4	10
Total	8	11	6	25

31. Timely Adoption: Placement in a Pre-Adoptive Home within 9 months

Measure

80 percent of children with a goal of adoption will be placed in an approved adoptive placement by the end of the 9th month from when their goal changed to adoption.

Methodology

To assess performance, CFSA provides manual data to the independent verification agency.

2021 Performance

CFSA placed 95 percent of children with a goal change of adoption in a pre-adoptive home within 9 months of their goal change.

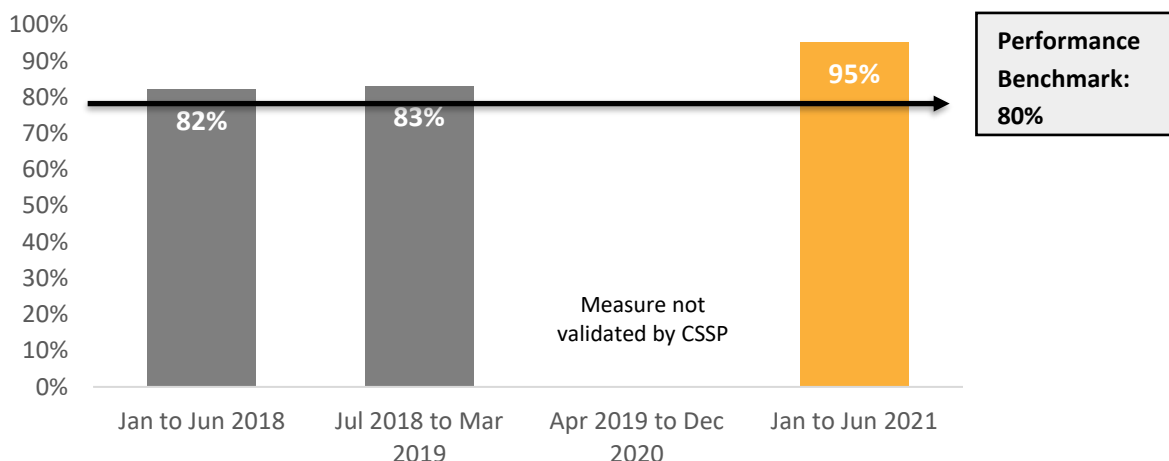
Historic Information

Placement in a pre-adoptive home within nine months was last validated by CSSP as part of the Implementation and Exit Plan (IEP) in the July 2018 to March 2019 performance period. At that time, 83 percent of children with a goal of adoption were placed in a pre-adoptive home within nine months of their goal changing to adoption. During the prior period, January to June 2018, performance was at 82 percent.

Analysis

The permanency goal for a total of 37 children changed to adoption during this performance period. Thirty-five of the 37 children (95 percent) had a Letter of Intent completed or petition to adopt filed before the 9th month of their goal being changed to adoption. The Agency therefore considered these children placed in a pre-adoptive home. CFSA continues to meet this measure.

Figure 43. Placement in a Pre-Adoptive Home within 9 Months



Conclusion

CFSA considers this measure achieved.

32. Aging out of Foster Care

Measure

No more than 15 percent of youth will exit foster care through aging out on their 21st birthday.

Methodology

To assess performance, CFSA utilizes data from FACES.NET and manual data retained by the Office of Youth Empowerment's Aftercare Services staff. CFSA analysts used FACES.NET administrative data to determine the youth who exited foster care on their 21st birthday. In April 2020 during the COVID-19 pandemic, DC Council passed legislation granting youth who turn 21 during the pandemic the option to stay in foster care until up to 90 days past the end of the declared DC public health emergency. Due to the small number of clients impacted by this legislation, and the unknown duration of the public health emergency, CFSA did not make changes to FACES.NET in response to the legislation. As a result, FACES.NET is still automatically end-dating older youth from their placement and home removal on their 21st birthday. These end-dates therefore show up in the data as exits. OYE is manually tracking the older youth who elected to stay in foster care. These youth are excluded from the exit data until they officially exit foster care.

2021 Performance

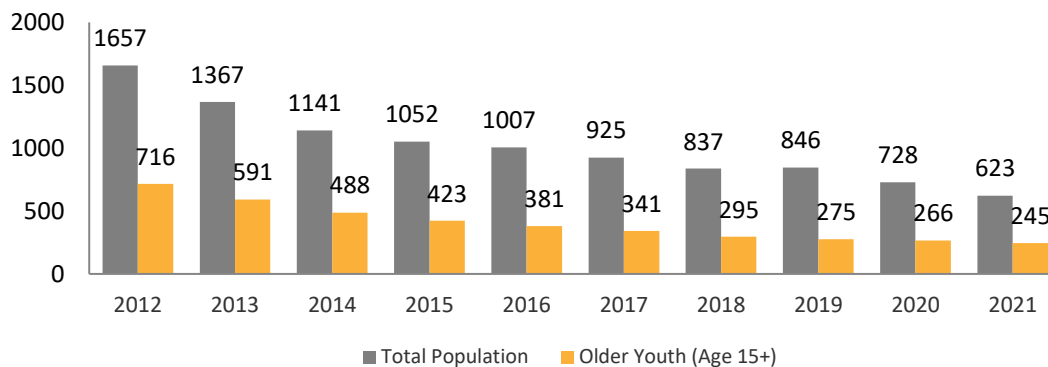
Of all youth who exited foster care during January-June 2021, 6 percent exited due to aging out of foster care (9 youth out of a total of 160 exits).⁹¹

Historic Information

⁹¹ One youth aged out early at the age of 19. The youth had run-away from her placement more than 12 months ago. CFSA was in communication with the youth, who did not desire to return to D.C. and had housing and employment.

CFSA has met the target set since FY 2018. In FY 2019, a total of 54 youth exited due to aging out of a total of 420 exits (13 percent), and in FY 2020, a total of 32 youth exited due to aging out of a total of 306 exits (10 percent).⁹² CFSA's older youth population continues to decline from its previous representation of nearly half of the Agency population [\(Figure 44\)](#).

Figure 44. CFSA Population (Point in Time), June 2012-June 2021



At the close of FY 2019, 140 children aged 18 and older remained in foster care, and at the end of FY 2020, 127 children remained in foster age 18 and older. Even though older youth in foster care are less likely to achieve positive permanence, CFSA continues to seek permanence through reunification with the birth family, legal guardianship (often with relatives) or adoption. In FY 2019, nineteen children of this same age group achieved positive permanence (Reunification, Guardianship, Adoption), and in FY 2020, 13 children achieved positive permanence in this age group. CFSA works to ensure that every youth in care has a relationship with a caring adult committed to providing life-long guidance and support. There is a vast service array to support preparing older youth for adulthood. CFSA also provides aftercare services to older youth after completion of the 21 Jumpstart Review for youth in foster care, ages 20.5 and older, up until age 23.⁹³

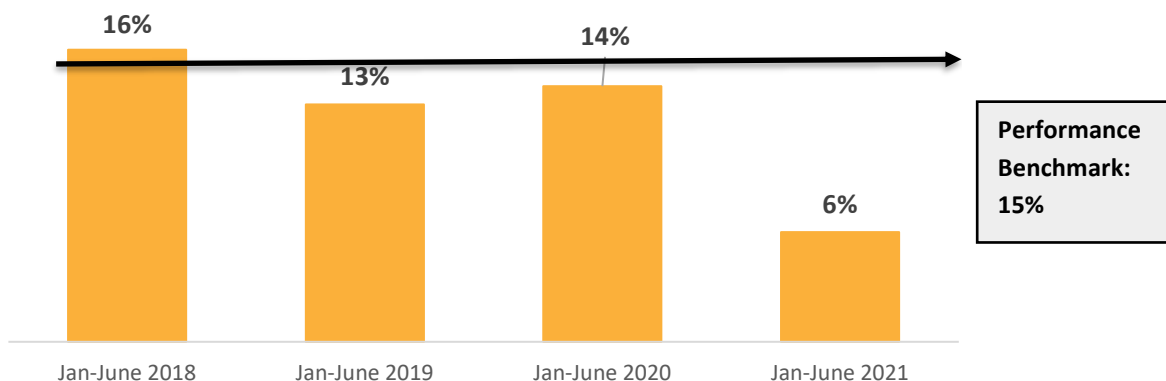
Analysis

During this review period, 15 young adults reached the age of 21 and therefore were due to age out of foster care. One child achieved emancipation during this timeframe at age 19. Of these 16 youth, nine youth (56 percent) exited foster care and seven (44 percent) elected to extend their stay in foster care beyond this review period. These seven youth exited their extended stay status in October 2021.

⁹² 14 youth elected to remain in foster care due to the DC Council COVID-19 legislation and are removed from the exits to emancipation and total exits.

⁹³ For all youth who age out of foster care, OYE conducts an additional meeting, the 21 JumpStart review, 6 months prior to the youth's 21st birthday. The review functions as a quality assurance tool to ensure realistic transition planning and a successful transition from care. JumpStart reviews do not take the place of YTPs. Rather, the reviews address the same domains and involve similar discussions for mitigating barriers and developing next steps. However, JumpStart reviews have the added benefit of including staff who specialize in transition planning and aftercare supports.

Figure 45. Youth Aging out of Foster Care, January-June 2018-2021



One hundred sixty children exited foster care during this review period in total. While youth continued to have the option to elect to extend their foster care stay due to the ongoing public health emergency, the continued decline in youth emancipating from foster care aligns with previous performance for this indicator and the decline of the foster care population overall. Prior to aging out, youth participate in the 21 Jumpstart Review, which is a meeting between the youth and their supportive network where participants identify the resources needed to prepare the youth to age out of foster care. CFSA holds the 21 Jumpstart Reviews for youth ages 20.5 and older. CFSA subsequently continues to provide supports and services informed by the findings and needs of each 21 Jumpstart Review.

Conclusion

CFSA considers this measure achieved.

33. Stable Housing

Measure

88 percent of youth who exited care due to emancipation or aging out will age out of care with stable housing.

Methodology

For this measure, the Agency defines stable housing as a youth having a lease, a housing agreement with a family member or friend, or a youth's enrolled in a transitional housing program. Placement in a homeless shelter or "couch surfing" between many locations is not considered stable housing. To assess performance, CFSA utilizes data from FACES.NET as well as manual data retained by the Office of Youth Empowerment's (OYE) Aftercare Services staff. OYE and CFSA analysts analyzed the OYE data first to determine the number of youth who exited care and then to determine their whereabouts at the time of exit. Exclusions include any youth who are in runaway status and incarcerated youth.

2021 Performance

100 percent of the youth (n= 6) who aged out of foster care did so with stable housing in place.

Historic Information

CFSA has met the benchmark for this measure every fiscal year since FY 2018. Innovative approaches to administering resources and services continually supported youth successfully exiting care with stable housing due to aftercare services provided by OYE and the implementation of specialized housing programs to include Wayne Place Transitional Youth Housing in 2015. Wayne Place is an innovative model established through CFSA's partnership with the Department of Behavioral Health. The project prevents homelessness by supporting the housing needs of young men and women ages 18-24 who meet the eligibility criteria. Residents receive educational and job support, money management, and other life skills. In FY20, Wayne Place served 22 youth and 15 youth were served in FY21 (Q1 &2).

In addition to the above, OYE's Generations Unit and referrals to the Making Money Grow program⁹⁴ and the Rapid Housing program⁹⁵ directly support a youth's capacity to obtain stable housing after exiting from foster care.

Analysis

Currently, 16 youth have reached the age of 21 and were slated to age out of foster care. Of these 16 youth, nine exited foster care. Three youth were excluded due to being in runaway status (2) or incarcerated (1) at the time of their exit. Six of these youth exited to stable housing options, including transitional housing (2) and housing for adults with disabilities (3). One youth entered a housing agreement with their prior foster family while also attending college away from the District.

Seven of the youth slated to exit foster care remained in foster care at the close of this review period and will exit foster care at 90 days past the end of the public health emergency, October 25, 2021. CFSA continues to plan with these youth to ensure stability upon exit from foster care. Social workers are still assigned to provide services for these youth while they remain in extended stay foster care.

Conclusion

CFSA considers this measure achieved.

⁹⁴ OYE offers youth the opportunity to participate in the financial literacy program, Making Money Grow (MMG). MMG teaches youth how to manage finances and save for the future. Youth have the opportunity to participate in a matched savings program where every dollar saved is matched by Capital Area Asset Builders (CAAB). The matched CAAB funds are capped at \$500 per year for youth aged 15 to 17 and capped at \$2,000 per year for youth aged 18 to 21. Youth can access the funds to pay for a vehicle, housing, education, or entrepreneurial endeavors.

⁹⁵ The Rapid Housing Assistance Program (RHAP) is short term rental assistance subsidies for youth and families who meet the following eligibility criteria: Children who will likely be brought into care, or the lack of affordable housing is the major barrier to family stabilization, and youth preparing to age out of foster care (with and without their own children).

34. Enrollment in/Completing Vocational Training

Measure

70 percent of applicable older youth will be enrolled in or would have recently completed vocational training or a certification program.

Methodology

To assess performance, CFSA utilizes manual data retained by the Office of Youth Empowerment (OYE). CFSA analysts analyze the OYE data to determine each youth's enrollment status for the timeframe, i.e., the youth was enrolled in a program, completed a program, or withdrew from a program.

2021 Performance

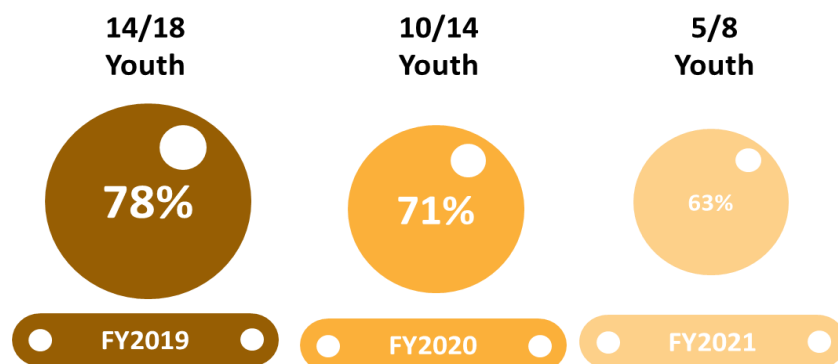
63 percent of the youth (5 of 8) who were enrolled in a vocational training or certification program maintained their enrollment or completed the training or certification program.

Historic Information

CFSA and private agency social workers are responsible for identifying older youth who are disconnected from productive life activities (education, vocational training, employment, etc.) and requesting assistance from OYE. Once identified, either the Supervisory Educational Resource Specialist or the LifeSet Supervisor will follow up with the social worker to identify the most appropriate next steps for the youth. Youth can be connected to different programs, such as the LifeSet program, CFSA internship programs, Department of Employment Services (DOES) employment opportunities and the Rehabilitation Services Administration (RSA). The LifeSet program is a comprehensive program with an intensive, established model that helps older youth overcome barriers as they transition from foster care. This program assists older youth with remaining engaged or re-engaging with productive life activities such as vocational programming/training, education, employment, and career opportunities. OYE provides employment services and vocational supports as an essential part of preparing youth for a self-sustaining income before, during, and after their transition from foster care. For youth interested in pursuing a vocational trade, OYE partners with public and private job-training programs and employers to offer youth opportunities for work experience, vocational training, certification, and sustainable employment. Social workers can assist youth with enrolling in these programs and can seek additional information and knowledge about vocational and certificate programs from the Independent Living team within OYE.

In FY19, 18 youth enrolled into and attended vocational/certification programs. At the close of FY19, 14 youth (78 percent) had completed or maintained enrollment in their programs. In FY 2020, 14 youth enrolled in either vocational training or certification program with 10 completing their program or maintaining enrollment for the fiscal year (71 percent) (Figure 46).

Figure 46. Youth Completing/Participating in Vocational Programming, FY 2019-FY 2021



Analysis

There were eight youth enrolled in either vocational training or a certification program during January through June 2021. Three youth completed medical assistant training and certification in nursing assistant programs. Two youth continue to attend and work toward completing their training or program at the close of the review period. Three youth withdrew from their programs; one youth voiced intent to return to the program in fall 2021.

There is low utilization of vocational training and certification programs, and programs introduced in recent years to work with disengaged youth more intensively (such as LifeSet) have specific enrollment criteria and serve youth who are willing to participate, and do not have significant mental or behavioral health diagnoses. During FY21, 54 youth engaged in paid internship opportunities in various industry types. This allowed for career exposure and development for youth exiting out of care. To successfully reach a larger number of youth, in FY 2022 CFSA plans to increase partnership with DOES to create opportunities and support youth to be successful employees. Youth will continue to have the choice to attend these programs, or to explore other options such as attending college or seeking employment.

Conclusion

CFSA considers this measure not achieved.

COMMITMENTS

A. ONGOING COMMITMENTS: SELF-REGULATION AND PUBLIC REPORTING

- 1. Creating and updating policies; ensuring current policies are available on the online policy manual accessible through CFSA's website and intranet; and training staff on new policies within 45 days of finalization.***

CFSA updated the Family Team Meeting policy, the Child Protective Services Diversion Administrative Issuance, Requesting Vital Records policy and developed the new the Placement Stabilization Staffing policies. The policies are available on CFSA's website and were trained when necessary within 45 days of finalization.⁹⁶

- 2. Continuing to strengthen CFSA's continuous quality improvement (CQI) processes and use the information to self-regulate, evaluate, and adjust practice and policy decisions; and continue to support a public reporting process, with quarterly and annual reports available on CFSA's website.***

Updated quarterly, the CFSA data dashboard includes an interactive format of CFSA data. The CFSA Data Dashboard reports section and the CFSA website includes both local and federal publications. The CFSA newsroom on the website includes CFSA testimony to the DC Council and information about performance oversight and budget requests.

- <https://cfsadashboard.dc.gov/>
- <https://cfsadashboard.dc.gov/page/informational-reports>
- <https://cfsa.dc.gov/newsroom>

Since September 2019, the Program Outcomes Unit in the Office of the Director, the program management staff, and the Performance Accountability and Improvement Administration, analyze data specific to monthly performance benchmarks. During "The Finish Line" monthly meeting, "champions" (program managers) from Entry Services, Program Operations, and OPPPS present the data to a panel of CFSA leadership (deputy directors and the chief of staff). In addition to presenting the data, the champions discuss strategies used to improve performance, as needed, and answer questions posed by the leadership panel.

⁹⁶ The term "training" includes both a formal and an informal means to provide information, including classroom, management team meetings, and program team meetings. Internal and external stakeholders receive information about new and updated policies in CFSA newsletters. Minimal changes to policy will not necessitate a formal training. Managers are expected to reinforce changes with their teams.

Further strengthening CFSA's CQI processes, a new forum called the "4 Pillars Huddles" is under development where supervisors will present information on data not included in the monthly Finish Line meetings. The purpose of these huddles is to ensure that leadership consistently receives input and insight from the front-line staff, and by extension, also builds supervisory capacity.

Further strengthening the Program Outcomes unit CQI efforts, CFSA hired two additional analysts to join it.⁹⁷ One analyst will support the In-home Administration and the other will support the Office of Wellbeing and Kinship Units. The analysts work directly with program level staff to conduct CQI with program staff using program level data.

The following reports were published on CFSA's website:

- The FY22 Annual Progress and Services Review
https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/FY2022_A_PSR_DC_CFSA_APPROVED_FINAL%20.pdf
- 2020 Child Fatalities Data Snapshot
<https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/2020%20Child%20Fatalities%20-%20Data%20Snapshot%2003.24.21%20%28FINAL%29.pdf>
- 2020 Annual Child Fatality Report
<https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/2020%20Annual%20Child%20Fatality%20Report%20vF%20-%202010.26.21.pdf>
- 2020 Annual Quality Services Review Report
<https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/QSR%202020%20Annual%20Report%20%28FINAL%29.pdf>
- CFSA's Interactive Data Dashboard (updated quarterly)
<https://cfsadashboard.dc.gov/>

3. CFSA continues to complete and make public an annual Needs Assessment and Resource Development Plan, and report on Financial Support for Community-Based Services

The FY 2021 Needs Assessment is posted on the CFSA Website and can be accessed at this link <https://cfsa.dc.gov/publication/needs-assessment-and-resource-development-plan>.

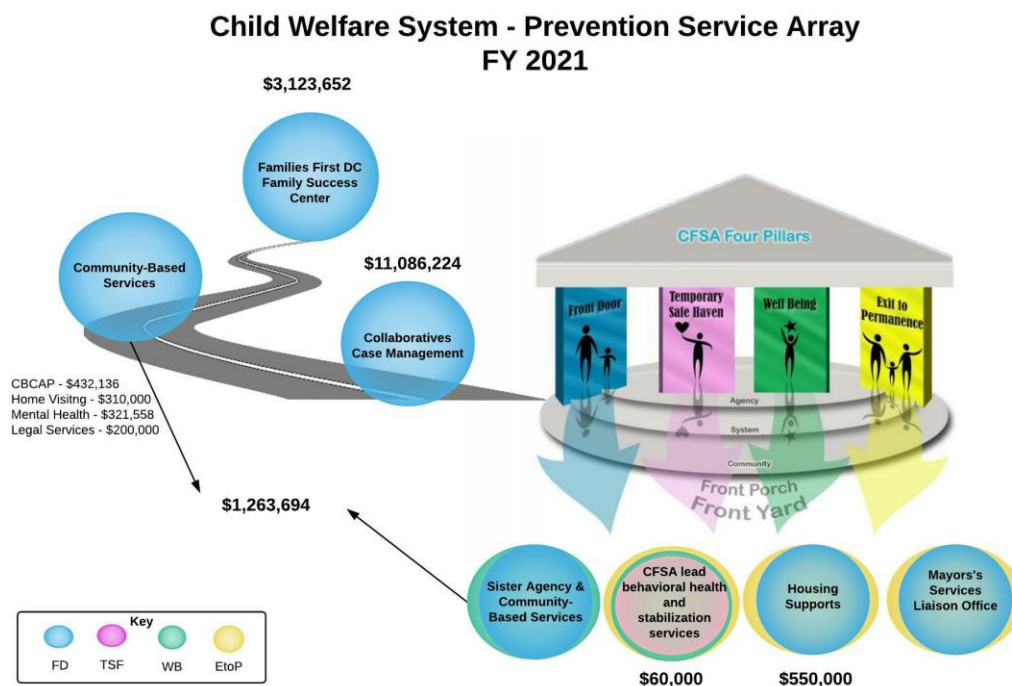
The Resource Development Plan is a compendium document used to inform the FY23 budgeting process currently underway. Once final, the Resource Development Plan will be posted on the CFSA website.

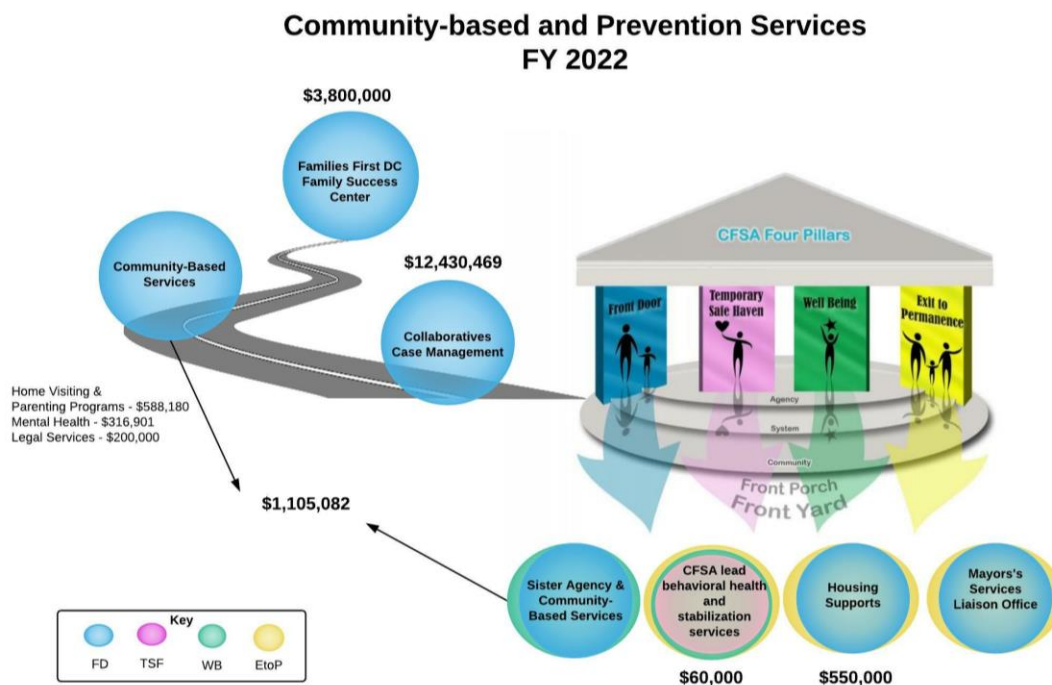
⁹⁷ See Introduction section for a description of the Program Outcomes Unit.

CFSA provides funding for community-based organizations to support families known to the child welfare agency such as the Healthy Families/Thriving Communities Collaboratives. The Collaboratives provides case management services and evidence-based programming to children and families in Wards 5, 7 and 8.

In addition, CFSA funds programs to prevent children and families from being known to CFSA through the 10 neighborhood-based Family Success Centers. To assist relatives who are caring for their younger family members, CFSA also provides monthly financial assistance to eligible District residents caring for grandchildren, nephews, nieces, siblings, and cousins through the Grandparent Caregiver's Program and Close Relative Caregiver's Program.

Please see below for additional information regarding funding for community-based services in FY 2021 and FY 2022:





4. Continuing to conduct Quality Service Reviews (QSRs) for at least two years after exit from Court jurisdiction, and at least once every two years thereafter.

CFSA continues to utilize Quality Service Reviews (QSRs). CFSA has staffing and a programmatic infrastructure to conduct 140 QSRs annually. QSR's are an integral qualitative continuous quality improvement process used to inform practice and policy changes. The 2021 reviews will conclude in FY 2022 Q1. Planning for the 2022 QSR reviews has commenced. The 2020 Annual Quality Services Review can be found at this link:

<https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/QSR%202020%20Annual%20Report%20%28FINAL%29.pdf>

B. ONGOING COMMITMENTS: 90 PERCENT OF CFSA STAFF WILL MAINTAIN CASE LOAD STANDARDS:

- Social workers conducting investigations of abuse and/or neglect will not exceed 1:12 investigations.
- Social workers providing services to children and families in which the child or children are living in their homes shall not exceed 1:15 families.
- Social workers providing services to children in placement, including children in emergency care and children in any other form of CFSA physical custody, shall not exceed 1:15 children in foster care.
- Staff having responsibility to conduct home studies shall not exceed 30 cases.

All caseload standards have been met throughout the reporting period.

SETTLEMENT ADDENDUM COMMITMENTS

On April 22, 2021, CFSA and the plaintiffs added an addendum to their settlement agreement that added three commitments.

A. Standards in Section IV.G

In establishing its standards as outlined in Section IV.G. of the Agreement, CFSA will, in collaboration with the IVA and in consultation with plaintiffs' counsel, include meaningful metrics that measure CFSA's performance regarding placement stability, parental visitation, child and family visitation, and permanency, including both reunification and access to subsidized guardianship and adoption.

CFSA worked closely with Chapin Hall to develop meaningful measures for placement stability, parental visitation, and permanency, including both reunification and access to subsidized guardianship and adoption. Best practices and research on other jurisdiction's measures were considered when deliberating performance measures. CFSA presented the proposed measures to the IVA on November 9th in preparation for a meeting with the Plaintiff on November 19, 2021. These measures have not yet been finalized.

B. Professional Resource Parents

CFSA will solicit and recruit for four additional professional resource parents with a minimum of four children, up to a capacity of eight children, ages 8 – 12 who present with significant behavioral and mental health concerns. Children placed in these homes will receive trauma-informed therapeutic supports to stabilize the placement and expedite permanency. CFSA will develop a scope of work by May 1, 2021, and initiate the recruitment process by June 1, 2021, with the goal of selecting the new resource parents by September 30, 2021, and licensing, if needed, to be completed approximately 150 days after selection. This provision replaces Section II.A of the Agreement.

CFSA met all the timelines and have selected 4 resource parents with a capacity of 8 beds who are now going through the licensing process. The professional resource parents are called Trauma informed Professional Resource Parents. A series of tailored training sessions will be provided (see Pre-Service Training Guide: Trauma Informed Professional Parents in the Appendix).

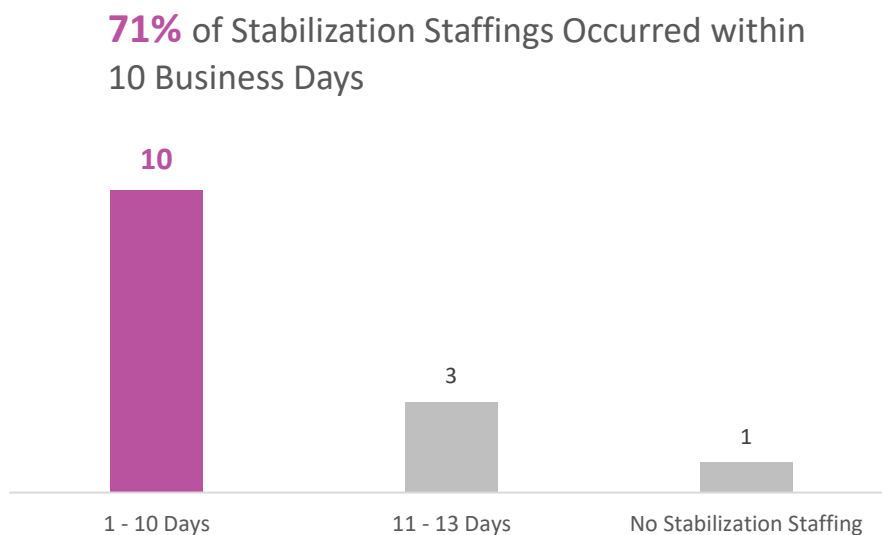
C. Stabilization Staffings

To address placement stability, CFSA will implement Placement Stability Staffings by the 10th day of any initial placement or within five days of a replacement. The Placement Stability Staffings are meetings between identified team members to gather and review

medical, social, behavioral, educational and other relevant information that will help stabilize placements and/or prevent current or future placement disruption. CFSA will implement this process for all new entries into foster care by June 7, 2021, and for replacements by August 1, 2021.

During May 2021, CFSA finalized the business process for initial entries and re-entries of children in foster care, trained CFSA and providers, and completed data validation. The staffings began on June 7, 2021.

Figure 47. June 2021 Stabilization Staffings: Initial Entries and Re-Entries into foster care, June 7 to June 30, 2021



Source: *FACES.NET PLC010 and manual data from the Placement Administration, entry dates of June 7, 2021 to June 30, 2021*

Table 16. June 2021 Stabilization Staffing Details: Initial Entries and Re-entries into foster care, June 7 to June 30, 2021

Initial Entries and Re-Entries	Date Entered Care	Placement Type	Stabilization Staffing Due Date	Stabilization Staffing Date Held	# of Business Days until Staffing Held	Agency	Required Participants Attended
Entry 1	6/7/2021	Diagnostic & Emergency Care	6/21/2021	6/14/2021	6	CFSA	Yes
Entry 2	6/8/2021	Traditional	6/22/2021	6/10/2021	3	NCCF	Yes
Entry 3	6/9/2021	Traditional	6/23/2021	6/14/2021	4	CFSA	Yes
Entry 4	6/10/2021	Traditional	6/24/2021	6/28/2021	13	LAYC	Yes
Entry 5	6/11/2021	Traditional	6/25/2021	6/14/2021	2	CFSA	Yes

Initial Entries and Re-Entries	Date Entered Care	Placement Type	Stabilization Staffing Due Date	Stabilization Staffing Date Held	# of Business Days until Staffing Held	Agency	Required Participants Attended
Entry 6	6/16/2021	Kinship	6/30/2021	6/21/2021	4	NCCF	Yes
Entry 7	6/16/2021	Traditional	6/30/2021	6/28/2021	9	CFSA	Yes
Entry 8	6/18/2021	Traditional	7/2/2021	6/25/2021	6	NCCF	Yes
Entry 9	6/18/2021	Traditional	7/2/2021	6/25/2021	6	NCCF	Yes
Entry 10	6/18/2021	Traditional	7/2/2021	6/25/2021	6	NCCF	Yes
Entry 11	6/21/2021	Not in Legal Placement - Awaiting Group Home	7/5/2021	Stabilization staffing did not occur - disrupted guardianship			
Entry 12	6/24/2021	Traditional	7/8/2021	7/5/2021	8	CFSA	Yes
Entry 13	6/25/2021	Kinship	7/9/2021	7/12/2021	12	CFSA	Yes
Entry 14	6/28/2021	Group Home	7/12/2021	7/12/2021	11	CFSA	Yes

Source: *FACES.NET PLC010 and manual data from the Placement Administration, entry dates of June 7, 2021 to June 30, 2021*

During May and June of 2021, CFSA finalized the business process for replacements and trained CFSA and providers. The staffings began on August 1, 2021.

INDEPENDENT VERIFICATION AGENT ASSESSMENT

INDEPENDENT VERIFICATION AGENT (IVA) VALIDATION REPORT

Introduction

The Center for the Study of Social Policy (CSSP) for many years served as the court-appointed Monitor in the *LaShawn A v. Bowser* class action, which required comprehensive reform of the District's child welfare system. In this role, CSSP collected, analyzed, and reported quantitative and qualitative data on the District's performance toward meeting agreed upon metrics pertaining to all aspects of child welfare practice, including child protective services, appropriate and stable placements, timely permanency for children in foster care, provision of health care services, training for staff and resource parents, among other areas. Following progress by the District in meeting the terms of the *LaShawn A v. Bowser* mandates, in June 2021, the Honorable Thomas F. Hogan of the United States District Court for the District of Columbia dismissed *LaShawn A v. Bowser* from federal oversight, and the Parties entered into a Settlement Agreement which outlined contractual obligations between the Parties.

Under the terms of the Settlement Agreement, the District is required to prepare and issue public performance reports for two six-month periods – January through June 2021, and July through December 2021 – that will be validated by CSSP, whose role changed from court-appointed Monitor to Independent Verification Agent (IVA). The goal of this transition is to provide a 12-month period in which primary responsibility for data collection, analysis, and public reporting is shifted to the District's Child and Family Services Agency (CFSA), with external validation by the IVA to ensure reliability of reported performance. Preceding this Supplemental Report (titled Independent Verification Agent (IVA) Validation Report) is CFSA's first report discussing January through June 2021 performance.

Methodology and Preparation of the IVA's Report

Beginning in the spring of 2021, the IVA worked with CFSA to collect, analyze, and validate performance data on agreed upon metrics for the period of January through June 2021. The IVA has also received and reviewed documentation from CFSA on their performance with respect to the "additional commitments" outlined in the June 2021 Settlement Agreement and Addendum.

The IVA has determined based on these validation activities that **all of the current performance data related to these metrics are accurate**. The IVA **did not validate** all contextual or illustrative

data and information, or historical data provided by CFSA within this report; the only data validated as accurate by the IVA are performance data for January through June 2021 on agreed upon metrics.

The primary sources of information used to validate CFSA's performance are: 1) data provided by CFSA, including aggregate and back-up data for select measures, and 2) information gathered through access to electronic case records in FACES.NET.⁹⁸ Supplementary verification activities were conducted by the IVA for the following measures:

- **Validation of Timely Initiation of Investigations.** CFSA and the IVA jointly conducted a review of all investigations closed in February and May 2021 in which contact was not made with all alleged victim children within 48 hours of the referral to the Hotline to assess if necessary efforts and attempts were made to locate and interview the children.
- **Validation of Timely Closure of Investigations.** The IVA reviewed investigations closed between January and June 2021 to assess if extensions to allow for closure of the investigation beyond 35 days were appropriately utilized.
- **Assess the Quality of Investigations.** CFSA and the IVA jointly conducted a review of a statistically significant sample of CPS investigations closed in March 2021 to assess the quality of investigations conducted during the reporting period.
- **Validation of Collaborative Referrals for Low or Moderate Risk Families.** CFSA and IVA staff jointly conducted a review of a statistically significant sample of CPS investigations closed in June and July 2021 to assess if those families at low or moderate risk of abuse or neglect and were assessed to need services and agreed to be referred were connected to a Collaborative or other community-based agency to meet their needs.
- **Validation of Visits between Parents and Workers and Parents and Children.** The IVA conducted validation of twice monthly visits between parents and workers, and weekly visits between parents and children to ensure that acceptable efforts to arrange required visits were made for instances where the worker documented the visit did not occur but efforts were made.
- **Validation of Caseload Data.** The IVA validated caseload size and assignment of cases between January and June 2021 for caseworkers within Entry Services – including CPS investigations and in-home services – and permanency.
- **Quality Service Reviews.** The Quality Service Review (QSR) is a case-based qualitative review process that requires interviews with the key persons who are working and are familiar with the child and family whose case is under review. Using a structured protocol, trained QSR reviewers interview key stakeholders – including the focus child and caregivers – and review case documentation in FACES.NET, synthesize the information gathered, and rate the child's status and functioning and how the system is performing to support the child and family. IVA staff and CSSP contracted reviewers are lead

⁹⁸ FACES.NET is CFSA's State Automated Child Welfare Information System (SACWIS).

reviewers for approximately two QSRs each month that reviews are conducted and participate in most weekly oral case presentations.⁹⁹

- **Placement Disruptions.** The IVA reviewed select data on reported monthly placement disruptions experienced by children in care during the reporting period.
- **Validation of Timely Licensure of Foster and Adoptive Parents.** The IVA conducted additional validation of data for those foster parents whose licensure took more than 150 days from beginning training to receiving a license to determine if the delay was due to circumstances outside of the District's control.
- **Other Verification Activities.** The IVA and staff continue to meet frequently with senior leadership and managers at CFSA, participate as a member of the City-wide Child Fatality Review Committee, and routinely collect information from external stakeholders, including contracted service providers and advocacy organizations.

Assessment

Overall, CFSA's performance during the six-month period of January to June 2021 reflects stable practice since CY2020, with similar strengths and challenges as the prior year. Of the 26 measures assessed this period, CFSA met the required standard for 14 (54%) measures, partially achieved the standard for two (8%) measures and did not meet the required level of performance for 10 (38%) measures. Strengths in practice and performance include:

- The quality of CFSA's investigative practice rose from 89 percent in September 2020 to 92 percent in March 2021.
- CFSA exceeded required performance for caseload standards of child protective services, in-home, and foster care workers (performance was 100% almost every month this period for all worker types).
- QSR data for CY2021 assessing in-home practice reflect improvements in assessing and planning for child safety (from 86% in CY2020 to 95% in CY2021).¹⁰⁰
- CFSA and its private providers also exceeded the 70 percent target for approval of new foster homes within 150 days (January through June 2021 performance of 79%).
- Timely completion of medical evaluations for children within 30 and 60 days after their entry into care met required levels most months of the period, although CFSA continues to struggle to ensure all children receive a full dental evaluation within 60 days of entering care.

Those measures not achieved include:

⁹⁹ The IVA is scheduled to provide reviewers for 15 QSRs between January and December 2021, and IVA staff participated in almost all oral case presentations during the year. Each case is presented to a panel consisting of CFSA representatives from the QSR unit, and IVA staff to ensure inter-rater reliability on QSR ratings.

¹⁰⁰ Between January and June 2021, all cases reviewed through the QSR were of children receiving in-home services. This partial year data is compared to QSR cases in CY2020 where children were receiving in-home services.

- Completion of required visits by social workers with children and parents, with a decline in performance from CY2020 for visits between parents and children (from October 2020 performance of 75% to May 2021 performance of 67%).
- Monthly performance toward the goal of ensuring 85 percent of all placements for children and youth are in a family foster home was not met, with performance ranging from 77 to 79 percent between January and June 2021.
- The standard for stability of placement for children in care between 8 days and less than 12 months was not met each month during the period; the standards for placement stability for cohorts of children in care longer than 12 months were met.
- The number of overnight stays in the CFSA office building has risen since the prior six-month period, with two overnight stays between July and December 2020, and four overnight stays between January and June 2021.

To address the gaps in the placement array and placement instability experienced by some children in care, CFSA has continued work to implement the additional commitments outlined in the Settlement Agreement and its Addendum. These include:

- ***Solicit, Recruit, and License Four Professional Resource Parents.*** In September 2021, CFSA selected four professional resource parents trained in trauma-informed care to provide intensive support for children ages eight and older (focus population of children 8 to 12 years old) who have mental and behavioral health concerns, which make family-based placements challenging. These families should be available to serve children beginning in early 2022.
- ***Maintaining a Surplus of Foster Home Placements.*** CFSA has reported maintaining a surplus capacity of between 23 and 32 percent *licensed* foster care placements (including non-kin foster homes and congregate care placements) each month between January and June 2021. Ninety percent of the reported licensed surplus capacity are non-kin foster care placements. CFSA's data system is not currently able to provide information on the number and percentage of homes that are *licensed but unavailable* at any given time due to, for example, vacation, home renovations, or illness, nor is there data available to identify which licensed homes have not received or accepted a new placement within a set period of time (such as 6 or 12 months). CFSA and its private providers licensed a total of 126 new kin and non-kin foster homes between January through June 2021; 141 homes closed during the same time period resulting in a net loss of 15 homes.
- ***Ensure Accessibility for Clinical and Therapeutic Services.*** CFSA has reported maintaining four in-house behavioral health therapists, a behavioral health supervisor, and a psychiatric nurse practitioner during the period under review. CFSA also reported maintaining a contract with a Core Service Agency (CSA) to provide therapeutic and crisis stabilization services to children in foster care and their families. Data reported by CFSA indicate that not all children eligible for an evaluation by the in-house therapists receive such evaluation; specifically, 81 percent (or 39 of 48 children) eligible for evaluation received the evaluation. Of those children who were recommended to receive therapy

following the evaluation, over half (60%) had services initiated with CFSA's in-house therapists, 35 percent were referred to a CSA, and one youth declined to participate in services. Although the contract with the CSA is to provide services for up to 150 children and families each year, reported utilization was low, with less than 10 children being referred and receiving services during the six-month period.

- ***Self-Regulation and Public Reporting.*** CFSA has continued its efforts to collect and utilize quantitative and qualitative data to assess system performance and outcomes for children and families. These data are used to make improvements to practice, as needed, and identify where additional resources and support are needed. There are a small number of performance measures that continue to require qualitative validation of performance as reflected in FACES.NET management reports, which cause some delay in accessing real time performance for those practice areas (such as timely initiation of investigations).

CFSA makes publicly available quantitative data regarding, for example, the population of children served in foster care and within their homes (including demographics and placement types), the number and types of exits from foster care, and the number of hotline calls and investigations completed each quarter.¹⁰¹ As outlined in CFSA's report, the Agency has produced and made publicly available multiple reports assessing their practice and agency functioning and need, including an annual Child Fatality report, QSR report, and Needs Assessment.

- ***Stabilization Staffings.*** As required by the Settlement Agreement Addendum, CFSA developed and began implementation of Placement Stability Staffings – a teaming process used to review information about a child and their needs, and identify services and supports necessary to ensure stability in the placement. CFSA has reported that these staffings began for new entries (within 10 days of their placement) in June 2021, and for replacements (within 5 days of replacement) in August 2021.
- ***Develop Meaningful Metrics.*** There remains important work ahead to develop and agree upon meaningful metrics for measuring and reporting performance toward placement stability, social worker and child visits with parents, and permanency. The IVA will continue to work with CFSA and Plaintiffs' counsel to finalize the metrics for CFSA's continued public reporting in CY2022 and beyond.

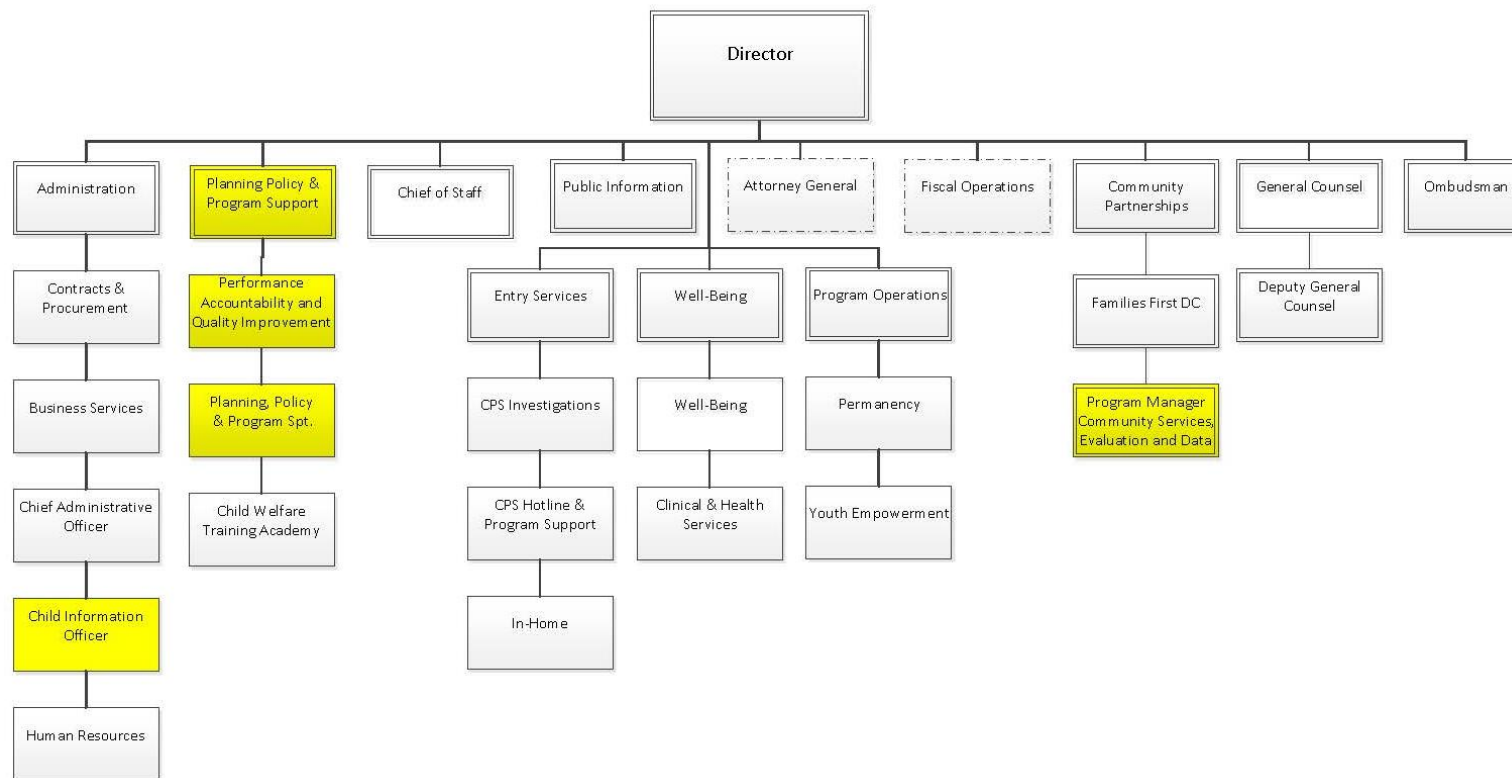
¹⁰¹ See CFSA's Public Dashboard at <https://cfsadashboard.dc.gov/>

APPENDIX

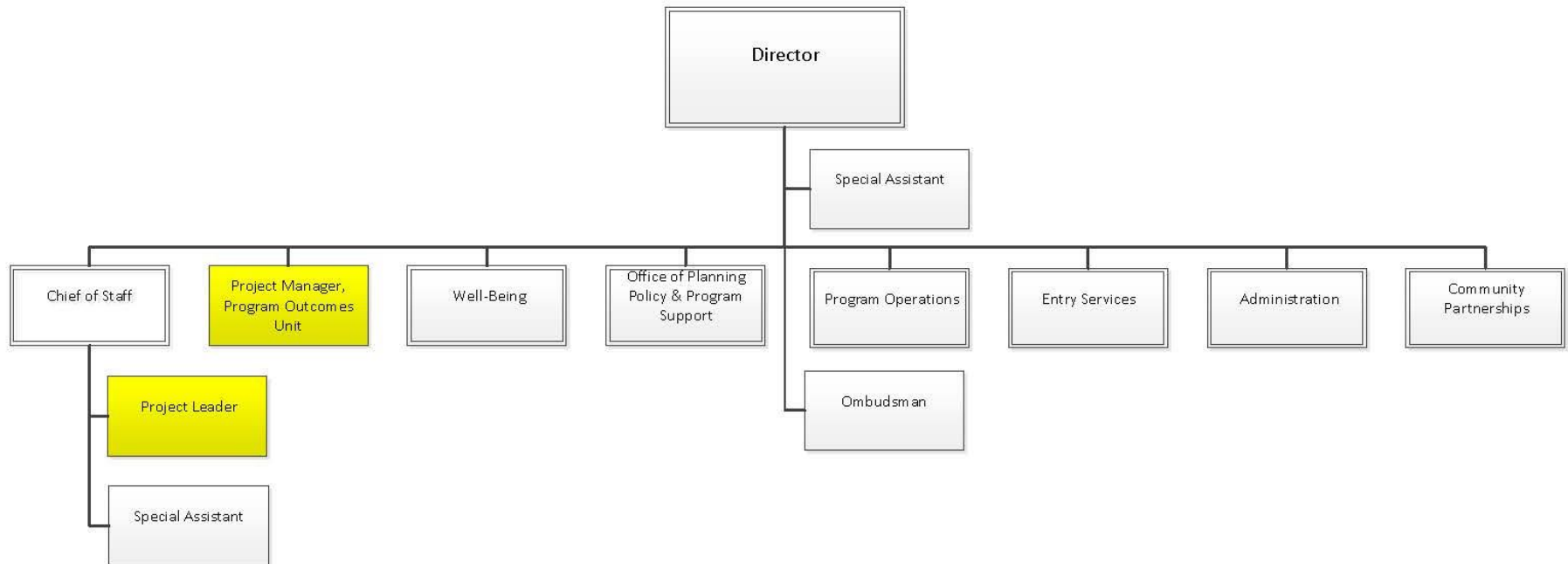
ORGANIZATIONAL CHART HIGHLIGHTING DATA PROFESSIONALS

Per the introduction on page 9, the below organizational chart highlights the data professionals embedded in program areas and within the Office of Policy, Planning, and Program Support to further CQI efforts across the agency. The first page includes the overall organizational structure and the units with a large number of key personnel for CQI efforts are highlighted in yellow. After the breakdown of the Office of the Director, the organizational charts provide more details about the positions within each of the units that are focused on CQI efforts.

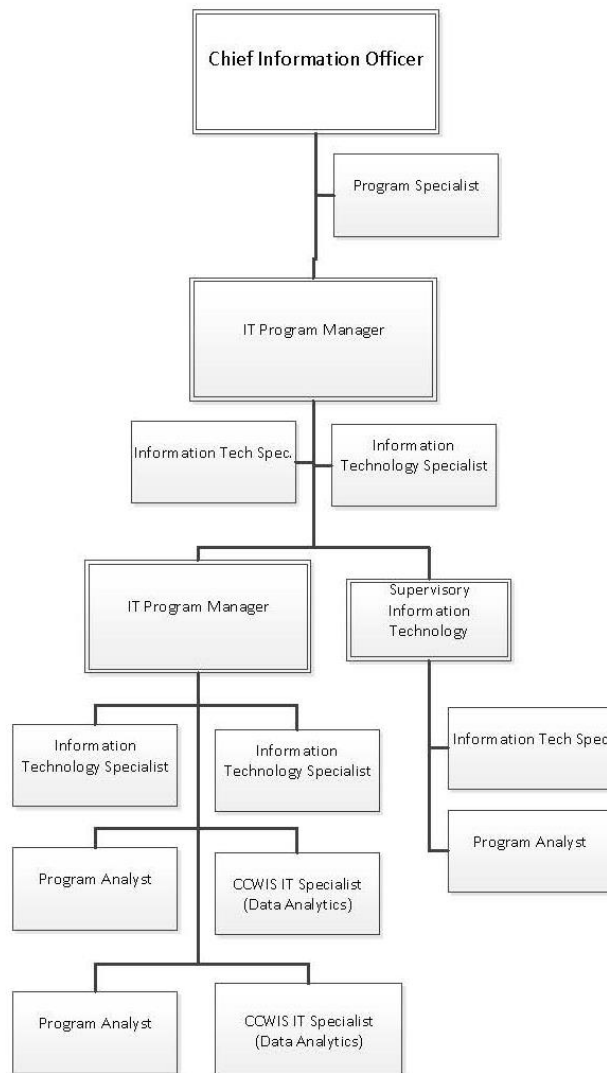
CHILD AND FAMILY SERVICES AGENCY-OVERVIEW



OFFICE OF THE DIRECTOR



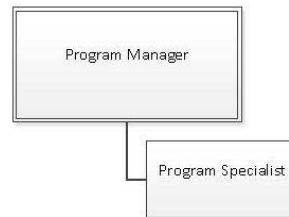
CHILD INFORMATION SYSTEMS ADMINISTRATION



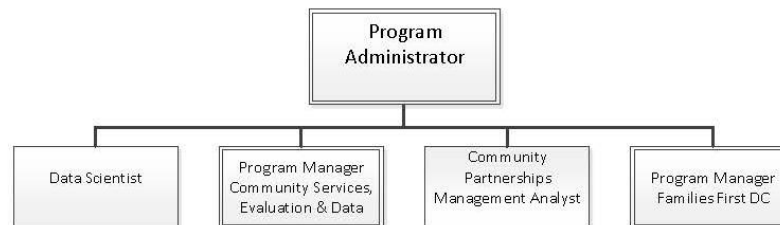
PROGRAM OUTCOMES UNIT



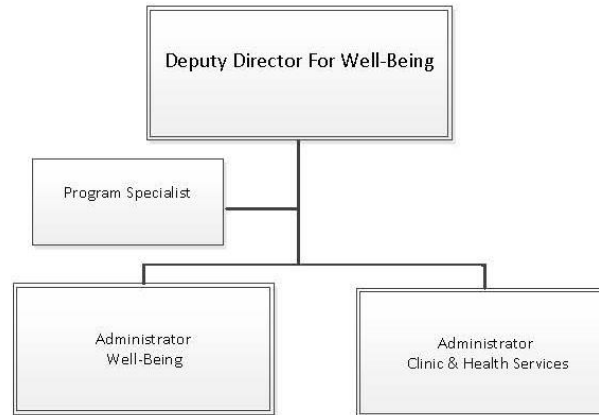
CONTRACTS MONITORING DIVISION



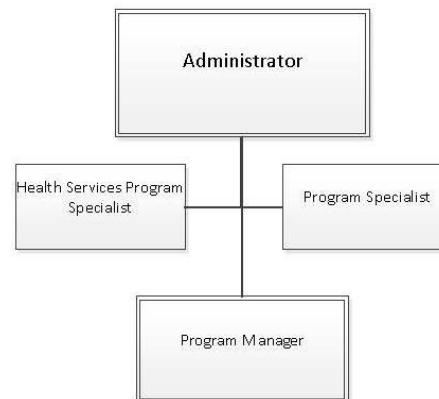
COMMUNITY PARTNERSHIPS ADMINISTRATION



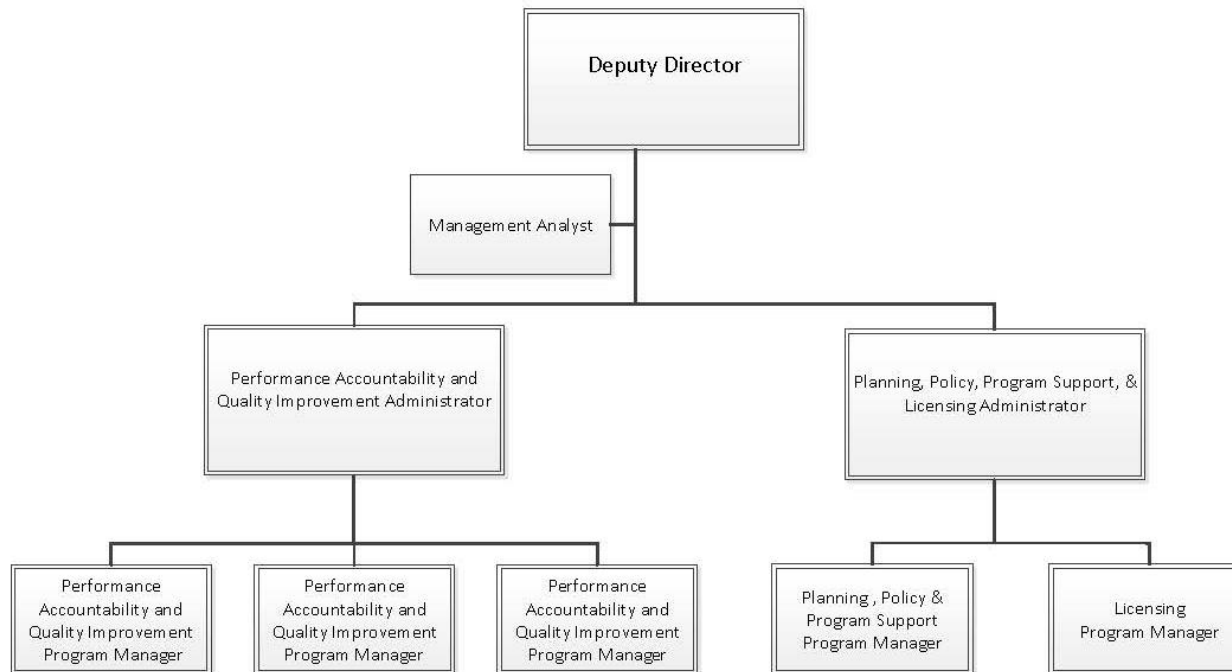
OFFICE OF THE DEPUTY DIRECTOR FOR WELL-BEING



HEALTH SERVICES ADMINISTRATION



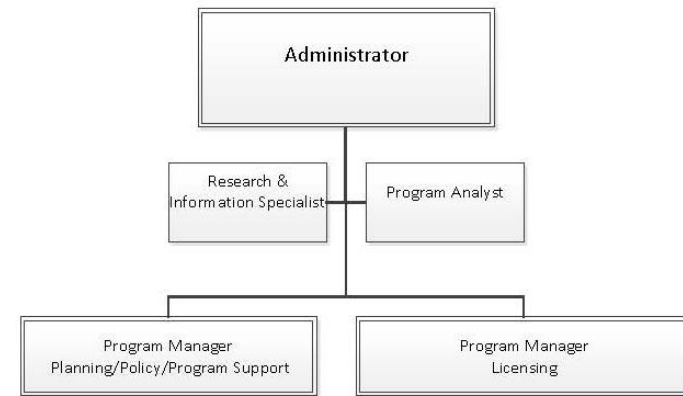
OFFICE OF THE DEPUTY DIRECTOR FOR PLANNING, POLICY & PROGRAM SUPPORT



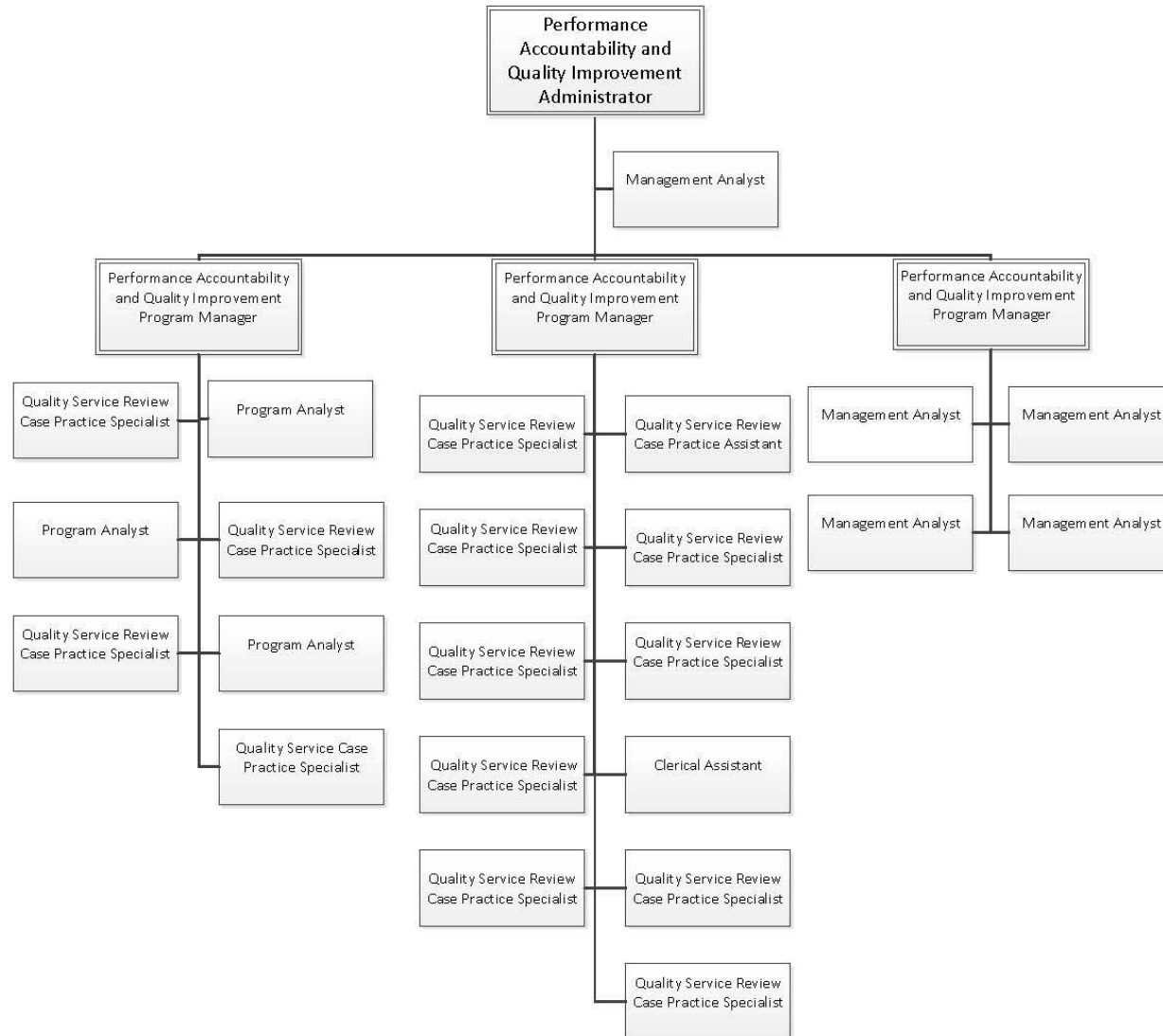
PLANNING, POLICY & PROGRAM SUPPORT



LICENSING



PERFORMANCE ACCOUNTABILITY AND QUALITY IMPROVEMENT ADMINISTRATION



PLACEMENT CAPACITY COMPARED TO CENSUS AS OF LAST DAY OF THE MONTH

Licensed Foster Homes and Congregate Homes as of last day of the month

Reporting Period	Foster Care Settings	Total Licensed Homes	Total Licensed Bed Capacity	Foster Care Census ¹⁰²	Unused Beds (%)
Jan-21	Family Based (not including Kinship)	355	639	346	229 (32%)
	Congregate Providers	11	84	51	
	Other Settings*	N/A	N/A	97	
	Total	366	723	494	
Feb-21	Family Based (not including Kinship)	307	554	353	149 (23%)
	Congregate Providers	11	84	51	
	Other Settings*	N/A	N/A	85	
	Total	318	638	489	
Mar-21	Family Based (not including Kinship)	350	625	343	222 (31%)
	Congregate Providers	11	84	55	
	Other Settings*	N/A	N/A	89	
	Total	361	709	487	
Apr-21	Family Based (not including Kinship)	347	618	334	224 (32%)
	Congregate Providers	11	84	54	
	Other Settings*	N/A	N/A	90	
	Total	358	702	478	
May-21	Family Based (not including Kinship)	335	591	335	197 (29%)
	Congregate Providers	11	84	53	
	Other Settings*	N/A	N/A	90	
	Total	346	675	478	
Jun-21	Family Based (not including Kinship)	343	612	337	222 (32%)
	Congregate Providers	11	84	49	
	Other Settings*	N/A	N/A	88	
	Total	354	696	474	

¹⁰² Children/youth placed in kinship homes are not included in the above table or calculation.

Kinship Foster Care Settings			
Reporting Period	Total Homes	Total Bed Capacity	# of Children in Foster Care Census (as of last day of the month)
Jan-21	167	240	169
Feb-21	147	210	161
Mar-21	155	221	161
Apr-21	153	221	158
May-21	150	215	151
Jun-21	151	212	149

Total Children						
Other Settings*	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21
Residential Treatment	21	18	19	19	19	19
COVID-19 Placement/Under 21 (Non-Paid)	5	0	1	0	0	1
Abscondence	31	30	26	32	30	28
College/Vocational	2	2	2	2	1	0
Correctional Facility	11	7	9	8	8	9
Developmentally Disabled	2	3	3	3	3	3
Hospitals	7	7	5	4	5	4
Juvenile Foster Care (Non-Paid)	1	1	1	0	0	0
Not in Legal Placement	17	17	23	22	24	24
Total	97	85	89	90	90	88

*Other Settings includes residential treatment, children who are placed in congregate COVID-19 respite placement due to COVID-19 situation, missing, absent or abducted, college/vocational placements, correctional facilities, children in placements paid for by Medicaid such as setting for children with severe developmental disabilities and hospital placements, and not in legal placement.

Source: PRD141 report run on the 1st of the following month is used to calculate for 'Total Homes' and 'Total Beds Capacity' counts as of the last day of the reporting month. CMT232 report run on the 15th of the following month is used to get the totals for '# of Children in FC census' as of the last day of the reporting month.

PLACEMENT INITIATIVES

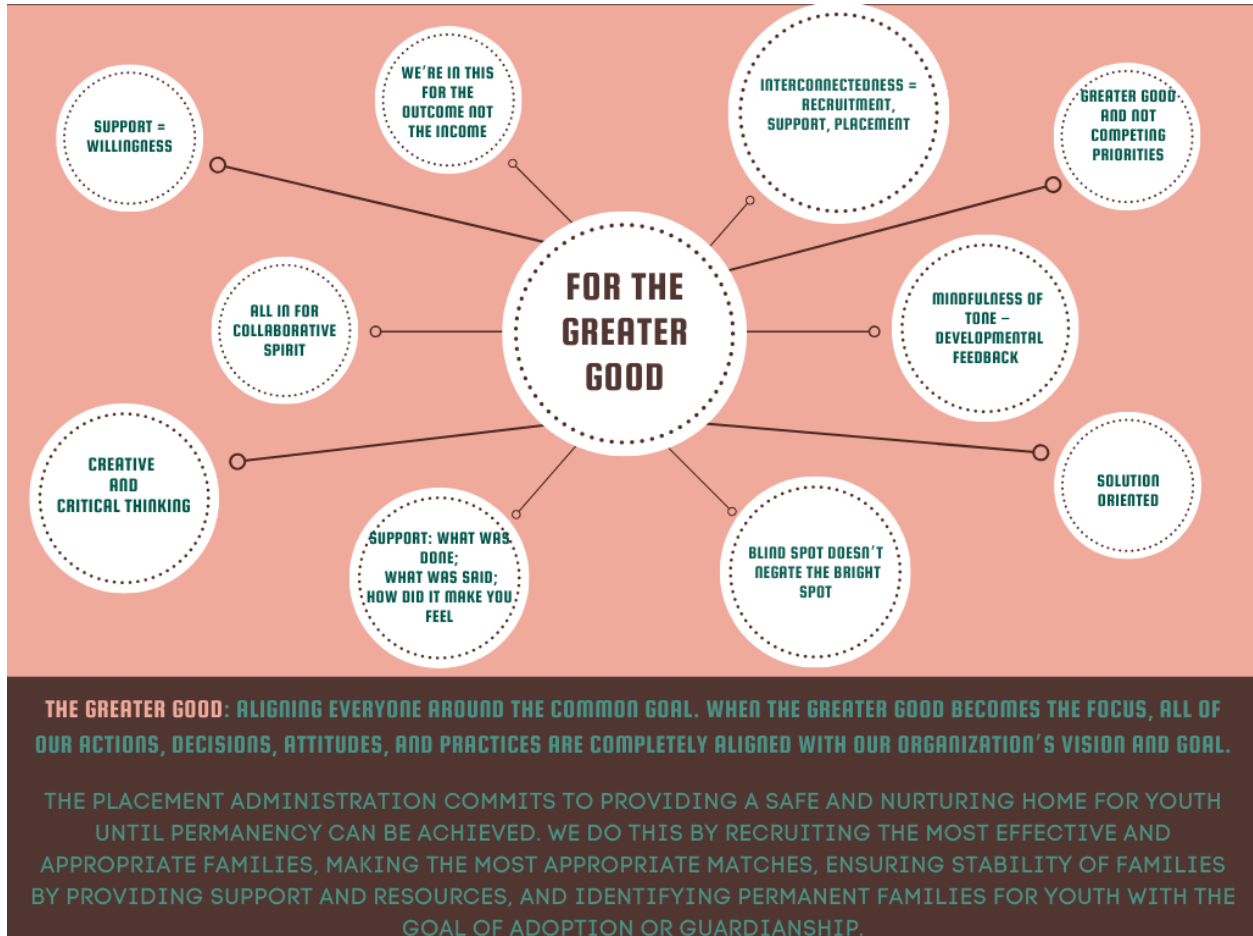
Improving Recruitment, Retention & Support of Resource Parents	
Strategic Efforts and Initiatives	Description
Improvements to crisis supports for resource parents	<p>From January to June 2021, CFSA continued to provide a comprehensive approach to crisis support around the clock. During normal business hours, the assigned Resource Parent Support Worker (RPSW) provides crisis intervention.</p> <p>In addition:</p> <ol style="list-style-type: none"> 1. A REACH Support Line (for parents and youth) is available Monday-Friday from 5:00 PM to 1:00 AM and on weekends and holidays from 9:00 AM to 1:00 AM. <p>The REACH Support Line provides after-hours support in an engaging, collaborative and advocacy-based manner.</p> <p>January – June 2021 update: Preliminary data show that the REACH Support Line is receiving approximately the same number of calls as the contracted provider (MCSS) received prior to the change in FY21.</p> <ol style="list-style-type: none"> 2. Two resource parent support workers were hired to respond to crisis calls in person or on the phone. These workers also carry a small caseload. <p>January – June 2021 update: CFSA is still in the evaluation phase of gathering data on the continued need for crises call response, however, preliminary data show there have only been three referrals during the past six months; leading the team to believe this need is not as critical as initially thought.</p>
Targeted training for Placement Administration staff and managers	<p>The Placement Administration staff has participated in the following trainings aimed at increasing their capacity to effectively with support resource parents in their role.</p> <ol style="list-style-type: none"> 1. Foster Parent Empowerment: Family Centered - Parent Coaching. A comprehensive, 3-phase course on proactive and reactive parent coaching techniques and interventions, including with high intensity emotional dysregulation, and oppositional defiant or disruptive behavior. <p>January – June 2021 update: Three booster sessions for resource parent support workers will occur in Spring 2022.</p> <p>In the next round of parent coaching training for staff, the focus will be on a prevention and proactive approach by</p>

Improving Recruitment, Retention & Support of Resource Parents	
	<p>understanding the parents and children better, and their dynamics, to best minimize and avoid a crisis as opposed to react to the crisis.</p> <ol style="list-style-type: none"> 2. De-Escalation: Trauma-Informed Crisis Intervention (MANDT) Training. An integrated approach to preventing, de-escalating, and, if necessary, intervening when behavior poses a threat of harm. 3. Working in Partnership to Improve Outcomes for Families: A series of affective activities, facilitated discussions, and group brainstorm aimed at increasing support for, and retention of, both staff and resource parents. <p>January – June 2021 update: Additional trainings occurred in March and April 2021. CFSA is also planning a booster session with a retreat for foster parent support, placement and recruitment staff scheduled for winter 2021. (see “For the Greater Good” infographic following this table)</p>
The BOND program (Bridge, Organize, Nurture, Develop)	<p>In April 2020, CFSA replaced its two-pronged Resource Parent peer support programming with the BOND program -- a unified “hub” model led by experienced and committed parents. BOND services include peer support, resource parent networking via monthly gatherings and respite services. The Initiative has a dedicated staff coordinator within the Placement Administration.</p> <p>January – June 2021 update: The BOND program continues to be supported.</p>
Enhancing the Specialized Opportunities for Youth (SOY) Program	<p>The SOY program provides placement and support for youth ages 13-20 who have not experienced success in traditional foster home settings and may not be appropriate for placement in a more restrictive setting (e.g., PRTF, juvenile setting, etc.).</p> <p>To improve placement stability and supportive services offered to SOY youth and SOY resource families, the following program enhancements have been added:</p> <ul style="list-style-type: none"> • Specialized training for SOY parents. • A dedicated Resource Parent Support Coordinator. • A SOY “Lead Parent” to provide peer support and planned or emergency respite for other SOY resource homes and serve as a transition placement

Improving Recruitment, Retention & Support of Resource Parents	
	January – June 2021 update: The SOY program continues to be supported.
Fellowship and Feedback	<p>In FY21, CFSA launched Fellowship and Feedback: a monthly, solution focused, open forum that encourages dialogue between the resource parent community and the agency.</p> <p>Led by the Deputy Director for Program Operations, multiple CFSA administrations participate in this forum so that resource parents have a platform to be heard and that service gaps can be identified and addressed.</p> <p>January – June 2021 update: The Fellowship and Feedback forums continue to occur.</p>
Parent Advisory Council (PAC) Restructure	<p>In FY21, PAC moved to quarterly meetings lead by Program Operations leadership with the mission to create a space for resource parents and birth families to share their outlooks and experiences in partnership with CFSA.</p> <p>PAC membership was expanded to include representation from a broader array of parent-serving organizations, and now also incorporates youth voices.</p> <p>January – June 2021 update: The Parent Advisory Council (PAC) continues to be supported.</p>
NCCF foster parent coaching	<p>NCCF implemented the Foster Parent Coach Academy in fiscal year 2020. Foster Parent Coaches provide 1:1 support to foster parents with a goal of maintaining placement stability. Foster Parent Coaches are assigned to:</p> <ol style="list-style-type: none"> 1. Newly licensed foster parent received first placement 2. Foster parents caring for a child that has experienced 2 or more placement disruptions within a 6-month period 3. Foster parents who requested 2 or more foster child replacements within a 6-month period 4. Foster homes with child/youth at risk of placement disruption 5. Foster home whose license is at risk of suspension 6. Foster parents who received a score of D or below on their annual performance evaluation

Improving Recruitment, Retention & Support of Resource Parents

January – June 2021 update: The Foster Parent Coach Academy continues to be supported.



Increasing Placement Stability

Strategic Efforts and Initiatives

Description

Increasing Placement Stability

SOAR (Stabilization, Observation, Assessment, and Respite Care) professional resource homes.	<p>In December 2019, CFSA established two SOAR homes for children needing comprehensive assessments before the attributes of suitable placement can be identified. SOAR resource parents have two beds each, provide temporary care for up to 90 days, and actively collaborate with CFSA to identify barriers and needs. During the 90-day placement, the SOAR home also initiates and maintains family relationships and services to meet the child's needs.</p> <p>The more comprehensive SOAR placements replace the short-term "interval placements" previously used.</p> <p>January – June 2021 update: Expectations are being met for the two established SOAR homes. Children who have left these homes have gone on to be placed in kinship placements, permanent resource homes, PRTFs and one congregate care placement. SOAR homes remain open and accessible to youth and providers are made aware of the team's clinical assessments and future plans for children once their SOAR placement has ended.</p>
Placement CQI	<p>In FY20, the Program Outcomes Unit enhanced the monthly report that closely tracks and monitors new entries to kinship care, disruption data over the last six months, replacement trends, overnight stays and the use of the Sasha Bruce Emergency Shelter. This report is shared widely and has allowed us to focus in on areas needing improvement.</p> <p>January – June 2021 update: This report continues to be used.</p>
Close tracking and monitoring	<p>In FY20, the Placement Administration instituted daily huddles to support close monitoring of all moves; anticipate potential disruptions; and identify supports needed to maintain a placement.</p> <p>In addition, all disruptions and their reasons are tracked and shared weekly with executive leadership.</p> <p>January – June 2021 update: The Placement Administration's daily huddles have continued.</p>
Dedicated liaison for partner agencies	<p>In FY21, a veteran Placement Resource Development Specialist (RDS) transitioned to serve as the liaison/primary point of contact between the Placement Unit and our partner agencies. The RDS collects, submits and distributes all referrals to our partner agencies. Creation of this position has dramatically streamlined</p>

Increasing Placement Stability

	<p>and organized this process and ensures there is a succinct body of documentation for all referral and placement requests.</p> <p>January – June 2021 update: Implemented during this reporting period.</p>
NCCF Placement Stability Meetings	<p>In FY20, NCCF conducted Placement Stability Meetings in addition to Disruption Meetings at the youth's new foster home. Placement Stability Meetings (PSM) are facilitated by NCCF Parent Partnership Specialist at the first indication of placement disruption or when a placement change request is submitted. PSM uses a strength-based model and are intended to address placement concerns to prevent disruption. PSM participants include but is not limited to the resource parent(s), the foster child's network, social worker, NCCF parent resource staff, NCCF placement team, NCCF licensing team, and when clinically and/or developmentally appropriate the youth is able to participate.</p> <p>January – June 2021 update: Placement Stabilization meetings with NCCF leadership occur every other month.</p>

TRAUMA-INFORMED PROFESSIONAL PARENTS PRE-SERVICE TRAINING GUIDE



PRE-SERVICE TRAINING GUIDE

TRAUMA-INFORMED PROFESSIONAL PARENTS (TIPP)

INTRODUCTION

Welcome to the Trauma Informed Professional Parents pre-service training! We are excited to provide you with information, support, and resources that will enhance your understanding and practice in this role.

This series of training is open to CFSA's Trauma Informed Professional Parents (TIPP), Bridge, Organize, Nurture, and Develop (BOND) Program Leads, Pregnant and Parenting Youth Professional Parents (PPY), Stabilization, Observation, Assessment and Respite Professional Parents (SOAR), and our Specialized with Older Youth (SOY) parents. Future sessions will be made available to our Traditional Resource Parents. ***Please do not forward this document or the registration links.***

Below you will find the full list of training sessions that will be offered as a part of this training process. Our goal in pre-service is to provide you with information to develop your competence and confidence as you provide care for children and you who have experienced trauma.

The training modules have been purposely sequenced to create an environment of support for the various aspects of this work. You will find that each session's topic builds upon the next, and it is therefore imperative that this outline is followed.

Sessions will be provided on Tuesdays, Wednesdays, and Thursdays, every other week for a total of 4 weeks of training over the course of 8 weeks (not including time off for holidays). Sessions are scheduled from 6:30pm – 9:30pm each evening. Each session will take place virtually utilizing WebEx. To register, please refer to the links provided below:

[Module 1: Trauma-Informed Care](#) (November 30 – December 2)

[Module 2: Understanding Behavior](#) (December 14 – December 16)

[Module 3: Addressing Behaviors](#) (December 28 – December 30)

[Module 4: Staying Connected](#) (January 11 – January 13)

Once you have completed Modules 1-3, you will be considered ready to have a child join your home and your pre-service training will continue.

If you have questions about any of the training sessions or topics, please do not hesitate to contact the Child Welfare Training Academy at cwta.training@dc.gov. We will respond to your inquiry within 24 business hours.

If you have questions about the role and responsibilities of the Trauma-Informed Professional Parents, please reach out to Dr. Regina Lawson (regina.lawson@dc.gov) or Kristin Barnes (kristin.barnes@dc.gov).

MODULE AND SESSION DESCRIPTIONS

MODULE 1 – TRAUMA INFORMED CARE (9 HOURS)

This module lays the foundation of trauma-informed care in the context of child welfare. Participants will obtain a better understanding of the role of trauma-informed professional parents, revisit discussions of trauma systems therapy, and be introduced to the instrumental concept of unconditional positive regard.

OVERVIEW OF TRAUMA INFORMED PROFESSIONAL PARENTS (TIPPP) INITIATIVE

Our Trauma Informed Professional Parents will provide care 24 hours per day, 7 days a week, for children and youth ages eight and up (focus population 8-12), who have experienced trauma, where an appropriate family-based placement is difficult to identify, because of mental and behavioral health concerns. This brief overview will provide information to TIPPP about their roles, expectations, and success.

TRAUMA SYSTEMS & CHILD WELFARE

This session is designed to provide opportunities for resource parents to gain parenting skills to support children with trauma histories regain emotional regulation. Resource and kinship parents - the team members who spend the most time with children placed in their homes will learn about the impact of trauma and skills that can help them parent children and teens who have experienced trauma through a systems approach.

UNCONDITIONAL POSITIVE REGARD

Based on the teachings of humanistic psychologist, Carl Rogers, unconditional positive regard is the concept of offering compassion through acceptance and support regardless of their actions. This session will provide resource parents tips on assessing their capacity for unconditional positive regard and ways to enhance this skillset.

MODULE 2 – UNDERSTANDING BEHAVIOR (9 HOURS)

Module two begins the work of understanding the unique development and behaviors of children and youth who have experienced trauma by first focusing on a set of specialized populations. Participants will then be introduced to the signs and behaviors of common childhood disorders and their likely origin. Finally, cultural humility will be discussed as a means of understanding behavior from a cross-cultural perspective.

FOSTERING SPECIALIZED POPULATIONS

This session is designed to provide resource parents with information on ensuring the safety, permanency, and well-being of children in foster care who have been identified as part of a specialized population per the Foster Parent Training Regulation Amendment Act of 2018. Participants will receive information regarding the unique development needs, parenting practice, and ways to best support children who are older youth, have experience

commercial sexual exploitation, identify as LGBTQ, have a disability, are pregnant and parenting, or who have a history of violent behavior.

COMMON CHILDHOOD DISORDERS

This session will introduce resource parents to common childhood psychological/behavioral disorders in child welfare as well as distinguishing features of the disorders. Specific diagnostic techniques and strategies for treating childhood disorders will be reviewed.

CULTURAL HUMILITY

This session will provide agency resource parents with foundational knowledge about implicit bias and privilege, while also focusing on the impact of oppression in the lives of the children and families served by the agency. It will include ways in which agency resource parents can work to transform how they support the children and families radically.

MODULE 3 – ADDRESSING BEHAVIORS (9 HOURS)

Addressing behaviors focuses on taking the learning from Module 1 and Module 2 and applying it to positive parenting and trauma-informed de-escalation. The session will provide opportunities for participants to assess their parenting style and support the alignment of parenting with de-escalation through a trauma-informed lens.

POSITIVE PARENTING

Parenting is both rewarding and challenging. Positive parenting brings together the knowledge and the mindset for parents to meet these challenges. Parenting is more rewarding as parents learn to promote children's natural potential for optimal outcomes. This session covers fostering children's emotional intelligence as well as their cognitive abilities, both critically important to their well-being and success. Participants will also be introduced to the major theories behind positive parenting.

TRAUMA-INFORMED DE-ESCALATION

This session offers a means to engage with an individual during a potentially dangerous or threatening situation from a trauma-informed perspective. Participants will learn about the brain's response to trauma, techniques to verbally de-escalate a child or youth, and develop plans to address emotional and behavioral dysregulation. The purpose of this training is to reduce the risk of physical injury to the child development professional, the resource parent, and the youth or adult being engaged.

MODULE 4 – STAYING CONNECTED (9 HOURS)

This fourth and final module turns focus away from the work of the participant to the participant's well-being. Recognizing the need for continued tangible support, Module 4 will highlight what the participant can expect from CFSA, reiterate the importance of understanding the impact of secondary traumatic stress and grief, and building a positive personal support network that can aid in being a safe space to recharge.

SPECIALIZED SUPPORT FOR TIPP

Trauma Informed Professional Parents have a Resource Parent Support Workers (RPSW) who solely supports them. This RPSW serves as an advocate for the TIPP's and the point of contact for all matters related to the resource parent community. This discussion will highlight all aspects of support TIPP can expect from the DC Child and Family Services Agency team.

UNDERSTANDING & ADDRESSING PRIMARY AND SECONDARY TRAUMATIC STRESS

Engaging in the support of children and youth who have experienced trauma leaves TIPP and others at a greater risk of experiencing primary and secondary traumatic stress. This session will provide a clear definition of vicarious trauma while also allowing the participant the opportunity to better understand the impact of secondary traumatic stress. Participants will walk away from the session with tangible next steps to address their experience of STS which will ultimately enhance their work as a TIPP.

UNDERSTANDING THE DYNAMICS OF GRIEF & LOSS

This training will explore the grief and loss process in children and adolescents. Participants will learn the common characteristics of a grieving person and what grief "looks like" throughout the different developmental stages of a child and adolescent. Participants will also learn different tools to use with grieving children and adolescents to facilitate emotional expression.

BUILDING A POSITIVE PERSONAL SUPPORT NETWORK

This workshop will highlight the importance of having a support network made of different people who help us to see problems in several different ways. We will examine how this network can offer advice, physical resources, perspective, and feedback to bolster resolve and help provide direction during the fostering journey. We will also examine the Strengthening Families Protective Factors Framework and highlight how positive social supports enhance family resilience and increase one's sense of belonging, feelings of self-worth and feelings of security. Self-assessment tools will be incorporated to determine the areas where positive entities can add value.



DC Child and Family Services Agency

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